

MAINE STATE LEGISLATURE

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DOCUMENTS

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THE LEGISLATURE

OF THE

STATE OF MAINE,

DURING ITS SESSIONS

A. D. 1842.

AUGUSTA:

SMITH & Co., PRINTERS TO THE STATE.

1842.

SECOND ANNUAL REPORT

OF THE

DIRECTORS

OF THE

MAINE INSANE HOSPITAL,

DECEMBER, 1841.

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Published agreeably to Resolve of March 22, 1836.  
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AUGUSTA:

SEVERANCE & DORR,....PRINTERS TO THE STATE.

1841.

Officers of the Institution.

JAMES McKEEN, M. D.
BENJAMIN BROWN, Esq. } DIRECTORS.
HON. REUEL WILLIAMS, }

ISAAC RAY, SUPERINTENDENT AND PHYSICIAN.

CHAUNCEY BOOTH, JR., M. D.,
ASSISTANT PHYSICIAN.

MR. HENRY WINSLOW, STEWARD.

MRS. CATHERINE WINSLOW, MATRON.

R E P O R T .

To the Governor and Council of the State of Maine:

The Directors of the Maine Insane Hospital in the discharge of a duty prescribed by law, respectfully offer the following

R E P O R T :

An Institution which has been so munificently endowed as the Maine Insane Hospital, and has attracted so large a share of the public interest and sympathy, and enjoys so much public confidence, imposes a deep sense of responsibility upon all those who are in any way accountable for a just administration of its affairs. In making this report, the Directors would respectfully call your attention to the condition of the patients now resident in the Hospital; to the manner in which the officers of the Institution discharge their several duties; to the improvements already made upon the grounds, and those which are in contemplation; to the unsupplied wants of the Hospital; and lastly, to the account rendered of the expenditures for the year past, and to the estimate offered of the appropriations, which, in their opinion, are deemed necessary for the year to come.

I. As to the condition of the patients, the Directors would chiefly refer you to the Report of the Superintendent, observing, that, as it regards their immediate and external physical comforts, their wants and necessities, that they are far better off here than they would be among their respective families and friends. At home, as a general fact, it is well known they feel under less control, are more turbulent, more exposed to

the continued action of the causes of their insanity ; their restoration is more protracted, more uncertain, and perhaps insanity is more likely to recur again; and lastly, their expenses almost every way are greater. When a patient is brought to the Hospital he is at once severed from many of those annoyances which have been more or less instrumental in causing his insanity ; new scenes, new ideas, new associations are forcibly impressed upon his mind ; he becomes more tractable, more quiet, and sooner restored to health. The different varieties and grades of insanity are likely to be better understood at a Hospital devoted exclusively to insane patients. Those who are not conversant with this affection are prone to look upon all cases of mental alienation as possessing a common character ; and the popular term expressive of insanity in an individual, is, that "*he has lost his reason.*" This popular theory of insanity, as expressed by such language, is untrue, and consequently the language is inappropriate. In many cases the *reasoning faculties* of the insane patient are, as far as can be ascertained, perfectly sound, and he will reason with as much correctness and as much acuteness, be his premises true or false, as he ever did. In fact he may be insane in his moral affections alone, or solely in his intellect ; or the mental alienation may have its seat in his voluntary propensities and will.

Different series of phenomena are therefore presented which may require the enforcement of different effective remedies ; for it is to be borne in mind that insanity is a disease—as much a disease as a pleurisy or a tooth-ache, and consequently as legitimate a subject for medical treatment. A conviction of these facts should satisfy the public that it is far better to send the unfortunate insane to an institution designed solely for their reception, than to entrust them to such persons as are totally ignorant of the nature of insanity, or even to *general practitioners* of physic, who, although reputed skillful, yet have not made *this* more a subject of study and reflection, than many of the ordinary episodes of professional practice. When patients are brought to this Hospital, the whole force of moral

means, and medical means if they are required, are always at hand and promptly administered, and with a success which the statistics and records of the Hospital demonstrate to be highly flattering.

The class of the *incurably insane* is quite large in all the States which have furnished us with statistical facts respecting insanity. It is made up of the bad cases, and accumulated results of years ; and while a large majority of recent cases admit of cure, if we look at the sum total of insane persons, including of course the curable and the incurable, we shall find that the latter make up by far the greater number. As a consequence of this, as soon as the doors of an Insane Hospital are thrown open, the first tide which rushes in and fills its galleries with patients, brings along with it a large proportion of incurable cases. This is true, it is believed, of almost every new Hospital for insane persons, and it has been so here, as it will appear by a reference to the Report of the late Superintendent, and by comparing its statements with a history of the cases there referred to, very many of these incurable patients were sent here, not so much for the purpose of providing them with a safe and comfortable retreat, where they might enjoy as much happiness as comported with their unfortunate condition, as for giving them the benefit of a supposed chance for recovery. But the exaggerated hopes inspired by a superficial knowledge and little reflection, were soon discovered to be vain and illusory, and several of these incurable patients (mostly paupers,) after a residence of variable duration, from three to nine months, at the Hospital, have been removed to their respective homes. The reason usually assigned for the removal of these patients is, that they can be supported by the towns to which they belong, at a cheaper rate than two dollars or two dollars and a half per week. These explanations are given for the purpose of illustrating two facts ; *first*, to show the reason why the proportion of patients discharged as cured from an Insane Hospital may be found smaller for the first year or two after it is opened for the reception of patients, than in subsequent years ; and

secondly, to show the reason why a diminution of numbers may be anticipated in the patients during those first years. As a Hospital becomes popular it receives a smaller number of incurable cases, and a greater number of recent ones, and of course, not only the number of patients increases, but there is a greater increase still in the proportion who are discharged cured.

We cannot pass over this portion of our report, in relation to the condition of the patients in the Hospital, without referring to their state when brought in; a state referable, in part at least, to their previous medical treatment. Nearly every patient who is brought here, brings with him a concise history of his case, written by his medical attendant, or his friends. These accounts, with all the facts which can be ascertained, are entered upon the records of the Hospital. From these it appears that all the patients, with a few exceptions, have been under the charge of *physicians*; or of such as choose to be known under the appellative of *vegetable doctors*, or of the *homœopathists*. The practice of the latter is certainly deserving of more commendation than in certain selected cases of the two former, if we may rely upon the endorsement of friends, that "it did neither good nor harm." In many cases evacuations have been unsparingly resorted to, and the mischievous consequences resulting from such treatment have been a higher grade of mental hallucination, and a more tardy recovery. On the other hand, from preconceived and partial views of certain facts, or a false theory of the nature of insanity, a contrary practice has been adopted, and patients subjected to a heating and stimulating process which has been unflinchingly pursued, to no good purpose, until as a forlorn hope, they have been sent to this Hospital. Insanity is not dependant upon an *inflammation* of the brain, that it should require depletion, nor upon *debility*, demanding stimulants. It is essentially a disease of *irritation*, of perverted function; and such as view the disease as dependant upon an excess, or a diminution, of the vital principle within the brain, and regulate their practice accordingly, will not as a general principle benefit their patients, nor

substantially their own reputation. That evacuants are called for in some cases, and tonics and stimulants in others, no one should, we conceive, deny. But we think there should be no exclusive practice adapted to all cases, and to be pursued under all circumstances. Such a course as this, is pointedly condemned by an inspection of the cases brought into this hospital, and is utterly at variance with the known laws of insanity.

II. In relation to the efficiency and faithfulness of the officers and attendants in the discharge of their various duties, the Directors would report, that they have carefully attended to this part of their duty. The public, which has through its Legislature endowed the Hospital with so much liberality, has a right to know the manner in which the administration of its affairs is conducted, and no party or personal influence should screen any one from a just scrutiny, who holds any official place in such an important public Institution. A peculiar fitness or qualification is demanded; and the natural anxiety of those who have here a parent, a child, a brother, sister, wife or husband, can be made endurable only, by the strongest guarantee, that their unfortunate relatives and friends are kindly treated, and that a watchful spirit of philanthropy is ever awake, to require from their public servants a faithful performance of their benevolent duty. We should consider it as cause for just and severe reprehension, did we know any one so far forgetting himself, and the good of any patient entrusted to this Hospital, as to lose his temper and treat him with unkindness or harshness, whatever may have been the provocation. Those who cannot control their own angry passions, are certainly unfitted to govern the distempered minds of others. A large endowment of the higher qualities of our nature; those which most of all honor and exalt the human character, should in no situation in life be more highly prized than when found in those who have in their charge the unfortunate insane. A sound intellect, a well-regulated mind, and a warm heart, united with an energy of purpose, and decision of character, should ever be considered essential qualities in those who are brought necessarily in con-

stant contact with insane persons. This is the scale and measure, in our opinion, which best secures the requisitions of justice and benevolence, and which we have brought to the inquiry in determining the fitness of those we find placed here in the immediate charge of the patients, and the various responsible duties of the Hospital. In the fulfilment of our official examination, we find ample cause to congratulate the public, and especially those who have friends placed here, that the management of the Institution is in as good hands as we find it to be. It is to be expected, perhaps, although the affairs of the Institution be managed in ever so efficient and faithful a manner, that jealousies and unfounded suspicions will exist, and both acts and motives be misconstrued, and an undeserved coloring given to many a praiseworthy deed. Notwithstanding, however, our diligence in searching after complaints, not a solitary instance has come to our knowledge of any thing worthy of reproach.

It will be seen, by the Report of the Superintendent that the present number of patients is somewhat less than it was a few months since. One reason of this diminution is, that many towns having voted, at their meetings in the spring, to place their insane poor in the Hospital for a stated time, and this time having expired, they were accordingly removed. Indeed, generally speaking, every Hospital for the insane, when established in a section of the country where nothing of the kind had existed before, becomes resorted to, among others, by many patients who for a long series of years have been deranged, and who have become incurably insane. The reason of this is, that many people who are but partially informed upon this subject, instead of looking upon these institutions as asylums only, or places of retreat for *incurable madness*, consider them in the same light as an Eye Infirmary or a Fever Hospital; and that in the same sense as patients go to the one to be cured of the diseases of their visual organs, and to the other of a fever, so in like manner they are all sent here to be cured of their insanity; and it is to be remarked, that in some instances, the

friends have expressed a disappointment that cases of the latter kind were not cured by as summary a process as they had witnessed in the two former. Several towns in the State have voted, in their public town meetings, to send to this Hospital, upon trial for a specified time, patients who had been more than half their natural lives, even upwards of twenty years, under the custody of bars and bolts, and who were only loosed from their cages to be brought here, under the vain expectation of being cured of their insanity.

III. Respecting the improvements made about the Hospital, the Directors would respectfully state, that while a glance at the grounds around the buildings shows that a great amount of labor has been performed the summer past, yet much remains to be done—much in the way of levelling; the rough places are to be made smooth, and old and useless buildings removed. All this may be done with but little expense to the Hospital, as the necessary labor is cheerfully rendered by the patients, who, in fact, look upon their services more in the light of recreation than labor. The patients themselves feel the better for their occasional toils, and are fully aware of their salutary tendency upon the health of body and mind. The Report of the Superintendent contains many striking examples of this. The spirit of emulation seems to have introduced method into all their agricultural and mechanical operations, and the amount of labor they have performed is truly surprising. Beside the work already alluded to, done by their hands, they have performed all the labor upon the farm, with the assistance of only one hired man. Two pits have been dug, the one ten by seventeen feet, and the other nine by eleven. These pits have been timbered from top to bottom, and are situated at the terminus of the common sewer, of which they are the recipients. All this labor cost the Hospital nothing. Stone walls, too, and post and rail fence, amounting to one hundred and thirty rods, are the products of their industry, costing the Hospital but a little more than the purchase of the materials. All of

these labors, and much more, have been rendered by the patients at our Insane Hospital.

It is in contemplation to have a garden on the Hospital grounds, not only for the growth of culinary vegetables, but for flowers and shrubbery. This would offer great attractions to such as have a taste for horticultural pursuits. To such as are in full health, and especially females, it would undoubtedly be of great service; many of those who could be induced by no persuasions to go beyond the thresholds of their galleries, for the purposes of air and exercise, would readily take an interest in the growth of fruit and flowers.

A SOLITARY, for the reception of females, admirably arranged in regard to strength and comfort, has been erected, just in the rear of the north wing of the Hospital. It was absolutely indispensable. Before it was built, many delicate females, who were convalescing, suffered from a contiguity to others under too much excitement to reside in the main wing, but who were necessarily detained there, because there was no other suitable place for their reception.

As to the improvements made upon the farm, we would say that larger crops have been obtained than could reasonably have been expected, considering the neglected tillage of preceding years. Although it has been well cultivated during the season past, it will require a good deal of nursing to bring up its fruitfulness to the full measure of its capacity. A schedule furnished by the Steward, containing the amount of the produce of the farm, will be found at the end of this Report.

IV. The Directors feel it their duty respectfully to call attention to such wants, and, as it regards some of them, at least, necessities, as cannot be supplied without further means than those now at their disposal. Horses and a carriage for the patients—a library—and a chapel for worship. Upon reflection, the propriety and importance of such acquisitions to the comfort and well being of the patients, will be obvious to every one. Observation long ago established the fact that exercise in

the open air, of a proper character, is one of the most efficacious means in the treatment of almost every disease, and particularly so in cases of insanity. Insane people cannot with safety be deprived of it. As a restorative means, moderate labor upon the grounds, if the patient has a taste and inclination for it, is of great value; the same may be said of walking. There are, however, cases in the Hospital, where the patients have unfortunately been deprived of the use of their limbs to that degree that they cannot walk; others are in such feeble health, or of such delicacy of constitution, that they are wanting the necessary strength; while a third class, made up, for the most part, of such as are in a state of great melancholy depression, cannot be persuaded to exercise at all. For all such persons, riding should be considered indispensable, and a commodious carriage and horses be procured. As an additional reason for such a provision, it must be borne in mind that during the inclement seasons of the year exercise out of doors cannot be taken in the usual way, even by the robust; the clayey soil renders walking out of the question, at such times, and no labor can be accomplished upon the grounds. If now, the facilities for out of door exercise be not furnished them when the weather and the walking are bad, they are necessarily pent up in their galleries, life becomes monotonous, they are haunted with ennui, lose what little elasticity and energy they have left, and there is great danger of their malady being aggravated. It is sincerely to be hoped that the Directors may have it in their power to purchase a carriage suitable for the purpose, before the winter and spring shall have passed away.

The Directors have alluded to the want of a library for the Hospital. Whenever the mind of a patient is so unsteady that it is constantly vacillating upon a multiplicity of objects, if something can be offered him which will strike his fancy, enlist his feelings, and concentrate and absorb his attention, a great amount of positive good is obtained in advancing his recovery. To make such means available, requires often times a good deal

of tact and skill on the part of the Superintendent. Upon the Catalogue of such *means*, books, are often of great service, and a library should no longer be a desideratum. Books of American Biography and American history generally, are much sought for by patients, and those who have charge of them have not the means of a suitable supply.

A chapel for the religious service of the patients is very much wanted. Visitors who have occasionally assisted in Divine service at the Hospital have been several times surprised and deeply impressed by the respectful demeanor and solemnity of the patients at worship. They not only listen attentively to the precepts of religious instruction, but they furnish a respectable portion of the choir. In fact were a person invited into the Hospital, and without knowing the place to which he was being taken, set down in one of their religious meetings, the suspicion that he was in the presence of an audience of insane people, both men and women, would probably be one of the last which would enter his mind, so seldom is there a departure from religious decorum. The forms of the Christian religion, when judiciously adapted, obviously exert a great influence over them—it allays their disturbed passions, gives to them more self possession; they feel their condition, their dependance, their absolute want of something to inspire them with hope, and their aspirations after the consolations of religion, it is believed, are not only sincere and fervent, but permanently salutary. The attic story of the Hospital is not appropriated to any special use—it is in a rough unfinished state, and cannot without a considerable expense be properly fitted as a comfortable chapel. It is strongly to be hoped that the necessary means will not be withheld to make it so.

The fences around the Hospital are in a miserable state, and must be replaced by others of a more substantial character. Many of the ordinary implements of husbandry are very much wanted, and we may enumerate among them a double horse wagon. The stock upon the farm should be increased—two or three cows more than they have at present seem almost

indispensable. We here offer an estimate of the probable expense of the several items to which we have called your attention :

Horses and Carriage	\$400
Library	100
Chapel	600
Fences, absolutely necessary	300
Farming utensils and double wagon	150
Manure	80
Cows	75
Seed for the farm	25
Finishing stable,	200
	<hr/>
	\$1,930

Besides the above, an appropriation will be necessary to defray the current expenses of the Hospital. The precise amount necessary cannot of course at this time be ascertained, as it will depend very much upon the number of patients. Suppose however the number of patients be *fifty-five*, the estimated expenditures for this number would be about \$7,400 While the above number of patients would contribute to the revenue of the Hospital the sum of 5,720

Leaving a balance to be liquidated from no other resource than an appropriation, of	1,680
Add to this the sum asked for above, for improvements,	1,730
	<hr/>
	\$3,410

The Directors have made these estimates with great care, and have put down little else than what seemed to them absolutely indispensable. It is to be desired that the appropriation may exceed this amount, in order to be prepared for some unforeseen contingencies. Of course, if it be not all wanted, the balance unexpended, will remain in the public funds ; as such sums only as are absolutely required are drawn from the Treasury and by virtue of the warrant of the Governor.

In consequence of the regreted absence of the Hon. Reuel Williams, one of the Directors of the Insane Hospital, who has ever taken a deep interest in its welfare, many valuable suggestions in relation to the institution will be wanting in this Report, but which, no doubt, will be offered at a future day. It is respectfully suggested, however, that still further legislation may be necessary, in pointing out such as should be considered proper subjects to be sent as patients to the Insane Hospital. In an Appendix to Section 5 of Chapter 32 of the Revised Statutes, it is rendered obligatory on the part of Overseers of the poor to send to the Hospital such persons as are paupers, or such as only require assistance, provided that such cases are supposed capable of relief. It is believed that not a single patient has been brought to the Hospital by virtue of this law. Whether this is to be imputed to inattention or ignorance, is to your Directors unknown. It is fervently to be hoped that the law will be complied with in future; that its provisions will even be made more liberal; and that the galleries of this Hospital will be thrown open, not only for such cases as may be supposed susceptible of relief, but to the permanently and incurably insane, provided they do not shut out, by their numbers, such as may be recovered from their insanity. There is no place where the incurably insane may be made so comfortable, so generally happy, so easily controlled, and well managed, as at an Insane Hospital. It is believed that such permanently insane individuals may be almost daily pointed out, perambulating the Hospital grounds, in company with an assistant, and perhaps other patients, as contented and as happy as their unfortunate situation permits them to be, and who are rarely, if ever, put in extreme duance; but who would become so ungovernably violent in almost any other situation, as to require them to be manacled, to be shut out from the light of day, and to be buried alive in cages and prisons. It is earnestly to be hoped that some of our laws touching insanity may be revised; that further provisions may be made for the comfort and happiness of the unfortunate insane, if not for their cure. Our

legislators have shown a marked partiality for the Insane Hospital ; it is still growing into favor with the people. May the State never repudiate an institution so deservedly popular, but bestow upon it its most generous sympathies ; always feel interested for it, watch over it, and nourish it.

Subjoined is the Report of the Treasurer and Steward. His books, accounts and vouchers have been examined, and are satisfactory.

JAMES McKEEN, } *Directors of the*
BENJ. BROWN, } *Insane Hospital.*

Insane Hospital, Dec. 31, 1841.



R E P O R T

Of the Treasurer and Steward of the Maine Insane Hospital.

The Treasurer charges himself with cash drawn from the State Treasury,	\$5,000 00
And from towns and individuals, for the support of patients, and small sums received for articles sold,	4,558 78
	<hr/>
	\$9,558 78

The expenditures were as follows :

For provisions and groceries,	\$2,901 49
“ fuel and lights,	968 22
“ wages and labor,	2,407 29
“ improvements,	1,887 84
“ furniture,	228 55
“ medical supplies,	349 53
“ hay and straw,	95 87
“ clothing, &c.	359 29
“ stationery,	58 42
Miscellaneous,	672 19
	<hr/>
	\$9,928 69

Outstanding debts now due from towns and individuals, for board of patients, all of which is undoubtedly good,	1,677 52
Amount due the Treasurer, for money paid out, to discharge all the debts of the Hospital,	369 91
	<hr/>
Leaving a balance due the Institution of	\$1,307 61

The item of improvements, includes:

For building a solitary,	\$816 56
“ “ a farm barn,	527 00
“ “ an ice-house,	93 00
“ moving stable and building cellar under the same,	167 00
“ building bank wall,	19 25
“ making fence, including 50 rods of stone wall and about 80 rods of post and rail,	129 75
“ building soap-vat, reservoir for slops, new doors, &c.	96 50
“ digging and stoning well, and pump for same,	38 78

\$1,887 84

The item “miscellaneous” includes the purchase of one horse, four cows, horse-cart, harnesses, plough and other farming utensils, ploughing of six acres of land, manure, &c. &c.

Estimate of the quantity and value of the produce raised by the patients, with the assistance of one attendant.

Potatoes, 800 bushels, at 30 cents,	\$240 00
Hay, 9 tons, at \$10,	90 00
Rutabaga, 40 bushels, at 34 cents,	13 60
Carrots, 18 “ “ 50 “	9 00
Beets, 8 “ “ 50 “	4 00
Beans, 5 “ at 1,34 “	6 70
Apples, 150 “ “ 25 “	37 56
Pork, 1,054 lbs. at 6 cts. per lb.	63 24
Summer vegetables, about	25 00
Cabbages, 500 heads, at 4 cts.	20 00

\$509 04

Owing to the neglect and bad management of the farm for a number of years past, there has not been so much realized from the amount of labor this year, as will be likely to be in years to come.

HENRY WINSLOW,
Treasurer and Steward of Maine Insane Hospital.

SECOND REPORT

OF THE

SUPERINTENDENT

OF THE

MAINE INSANE HOSPITAL,

DECEMBER, 1841.



R E P O R T .

TABLE 1.

Admissions and discharges.

Patients admitted, . . .	105	Patients discharged, . . .	79
Males,	62	Males,	46
Females,	43	Females,	33
	— 105		— 79
Recent cases,*	45	Recent cases,	36
Old cases,	60	Old cases,	41
	— 105		— 79
Remaining Dec. 31, 1840,	28	Remaining Dec. 31, 1841,	54
Males,	21	Males,	36
Females,	7	Females,	18
	— 28		— 54
Recent cases,	5	Recent cases,	12
Old cases,	23	Old cases,	42
	— 28		— 54

Whole number of patients in the course of the year, 133

Greatest number of patients at any one time, 70

Smallest number of patients at any one time, 28

* By recent cases are meant those of less duration than one year ; all others are included in the old cases. I have adopted this classification in deference to the practice now somewhat common in New England hospitals, but I must be allowed to express my conviction that the distinction is without any precise, well-marked difference, and had better be abandoned.

TABLE 2.

Condition of the patients discharged.

	Recovered.	Improved.	Not improved.	Died.
Recent cases,	27	5	3	3
Old cases,	6	15	17	3

Per cent. of recoveries of recent cases discharged in the course of the year,	*71
Per cent. of recoveries of old cases discharged in the course of the year,	14 $\frac{5}{8}$
Per cent. of recoveries of all cases discharged in the course of the year,	41 $\frac{3}{4}$
Per cent. of deaths of all cases discharged in the course of the year,	7 $\frac{3}{8}$
Per cent. of deaths of all in the Hospital during the year,	4 $\frac{1}{2}$

* Two of the recent cases discharged uncured were returned to the Hospital, and finally discharged cured; so that really the per cent. of recoveries of recent patients is 75. If we deduct two other recent cases that were removed after a few weeks residence, and who would probably have been cured had they remained, the per cent. of recoveries would then be 85.

TABLE 3.

Condition of the patients remaining.

	Favorable.	Unfavorable.
Recent cases,	11	1
Old cases,	8	34

TABLE 4.

Duration of Patients' insanity.

In those remaining in the Hos- pital.	In those discharged in the course of the year.
Less than 1 year, . . . 12	Less than 1 year, . . . 38
From 1 to 5 years, . . . 25	From 1 to 5 years, . . . 26
From 5 to 10 years, . . . 8	From 5 to 10 years, . . . 5
From 10 to 20 years, . . . 4	From 10 to 20 years, . . . 6
Over 20 years, 5	Over 20 years, 4

TABLE 5.

Showing how long the recent cases discharged, remained in the Hospital.

Cured.	Uncured.
6 weeks, 3	2 weeks, 1
From 6 to 12 weeks, . . . 8	From 3 to 4 weeks, . . . 2
From 12 to 20 weeks, . . 10	From 12 to 20 weeks, . . 3
From 20 to 30 weeks, . . 5	Over 20 weeks, 2
From 30 to 40 weeks, . . 1	
Average residence $14\frac{1}{4}$ weeks.	Average residence, $13\frac{3}{8}$ weeks.

TABLE 6.

Showing how long the old cases discharged remained in the Hospital.

Cured.	Uncured.
From 6 to 12 weeks, . . . 1	4 weeks or less, 4
From 12 to 20, 2	From 4 to 12 weeks, . . . 2
From 20 to 40, 3	From 12 to 20, 9
	From 20 to 40, 16
	40 weeks, 1
Average residence, $17\frac{3}{8}$ weeks.	Average residence, $29\frac{3}{8}$ weeks.

NOTE. The deaths are not included in the last two Tables.

TABLE 7.

Showing the causes of death.

Consumption,	2
Apoplexy,	2
Diarrhœa,	1
Exhaustion, produced by profuse bleeding before admission, 1	

TABLE 8.

Showing the comparative expense of several old and recent cases that have been in the Hospital in the course of the present year.

OLD CASES.			RECENT CASES.		
Present age.	Time insane.	Total expense while insane, at \$100 a year.	Present age.	Time insane.	Total expense while at the Hospital.
53	40	\$4,000	21	8 m's.	\$48 50
53	37	3,700	23	6 "	48 57
55	20	2,000	50	4½ "	20 29
47	31	3,100	40	11 "	16 44
56	20	2,000	27	7 "	63 30
39	12	1,200	27	10 "	49 17
32	8	800	48	2½ "	14 00
53	30	3,000	38	2½ "	22 00
38	15	1,500	53	1½ "	11 25
37	13	1,300	28	3 "	27 50
41	7	700	22	13½ "	80 50
40	20	2,000	20	4 "	24 58
Whole expense of these 12 old cases has been \$25,300.			Whole expense of these 12 recent cases has been \$426.		
Av'ge expense, \$2,108 33.			Average expense \$35 10.		

The above Tables sufficiently exhibit the statistics of the Hospital during the past year. Notwithstanding the discouragements under which every such institution must naturally labor, before it has got fairly under way, as well as some which have been peculiar to this, we have had the satisfaction of seeing the work of humanity not entirely fail in our hands. We have seen the glorious light and liberty of reason restored to some whom it had deserted for a season, and comfort and a sense of enjoyment imparted to many more, who had almost lost the image and superscription of men. We have done something ; let us hope that in future years our institution will be second to no other of the kind, in the amount of good it shall accomplish.

The first point that arrests our attention, (Table 1,) is the comparatively small number of the insane that have been received into the Hospital. By the United States census of 1840, it appears that there are in this State 631 insane persons ; of which number only 135 have enjoyed at all the benefits of the institution. Of these 631 persons, a large portion, no doubt, are idiots and other incurables, who can hardly be considered as fit subjects of medical or moral treatment, and who are as well off wherever they are kindly treated, as they would be with us. Still, after making all reasonable deductions of this kind, there are, unquestionably, more than 134 who would be, either completely restored, or greatly improved, mentally and bodily, by a residence in the Hospital. Of several reasons which might be assigned, why we should have had so few patients, the most efficient is, probably, a want of faith, arising from ignorance or prejudice, in the superior advantages possessed by such institutions, in the treatment of insanity. Correct views on this subject are so important, that, at the risk of being tedious, I will venture to unfold some general principles, which may be regarded as established among those who have had much to do with the management of the insane.

It was once a very prevalent notion, and one that has not entirely disappeared even now, that insanity is a direct visita-

tion of God ; and though in civilized communities, no peculiar sacredness has ever been attributed to its subjects, as is the case in some eastern countries, yet they have too often been regarded as beyond the reach of ordinary remedies. There is something so appalling in the spectacle of a mind diseased—of a man divested of the noblest attributes of humanity—that to our ancestors secondary causes seemed inadequate to produce such an extraordinary phenomenon. This notion, however, has no foundation in nature. Insanity is no more the effect of divine power, than any other disease. All we know of it shows that, like other diseases, it is subject to the laws of nature, in its origin, progress and termination. Like them, it is dependent upon some morbid condition of the bodily organs, developed by exposure to various exciting causes, and more or less controlled by medicines. Like them too, it increases with the progress of civilization, becomes hereditary in families, and relapses on the renewal of the exciting cause. In short, we are not warranted by a single trait in its history, in believing it to be exempted from the operation of the ordinary laws of disease, and subjected only to special influences. Such being the case, the remedial treatment of insanity becomes a subject of the deepest interest ; especially that part of it which consists in the application of moral influences, by means of certain architectural arrangements and an appropriate system of police.

In a community where insanity is so prevalent as it is in New England, the advantages of institutions devoted expressly to the care and management of the insane, over the ordinary means of providing for the sick, ought to be generally understood. Almost daily experience has convinced us that their nature and objects are greatly misapprehended, while it has strongly reminded us that the natural consequences of such misapprehension are disappointment and complaint. Let us, then, consider, somewhat minutely, the reasons why insanity can be more successfully treated in large establishments like ours, than in private families.

In the first place, most insane people labor under some per-

version of the moral affections, in consequence of which those most near and dear to them are viewed with all manner of distrust and suspicion. The father, the child, the brother, the sister, the friend and companion, no longer stand to the unfortunate patient in those endearing relations, but are regarded as being combined with his enemies in their designs upon his health, peace and good name. In the conspiracies which haunt his brain, his nearest friends bear the most prominent part, and every attempt to convince him of his error only serves to strengthen his delusions and increase his aversion. Their kindest attentions are offered only to be repulsed, and instead of soothing his perturbed spirit, their only effect is to irritate and inflame it. He believes the food and medicine are filled with poison; the slightest movement is viewed with suspicion; and the most innocent expressions are tortured into words full of evil import, and significant of deadly designs. Nothing can exceed the perverse ingenuity with which he will attach the most significant meaning to things of trifling moment, and without the slightest reference to him. The least personal restraint confirms his worst suspicions respecting the intentions of those around him, aggravates his nervous irritability, and stamps an impression upon his mind, perhaps, that years of restored soundness may never obliterate. To be contradicted and thwarted, deceived and betrayed, by one's own relations and friends, is far more galling than such treatment would be from strangers; and with a vividness unknown to the sane mind, he feels perpetually the force of the scripture declaration, that "a man's foes shall be they of his own household." The consequence of this state of feeling is, that the patient will repose no confidence whatever in those who are really his friends; and without this confidence, in some degree, we can make but little progress in the restoration of the disordered mind. Medicine and food may be forced upon him, it is true, but much of their efficacy is lost, so long as the intentions of those who administer them are believed to be evil continually. Believing nothing that is told him, and fearing the worst, his

attention is painfully kept on the stretch to observe the movements of those who profess to be his friends, and all the faculties of his mind are occupied with the contemplation of his own condition. Thus the physical irritation is maintained by the moral excitement, till a train of morbid actions is established, and every chance of recovery is lost. When, on the other hand, he is placed in an institution devoted solely to the insane, the most prominent sources of annoyance are gone. He finds himself among strangers whose kind words and soothing attentions are less likely to be misconstrued, because they are not yet associated in his mind with those malevolent designs in which his own friends are engaged. He is rather inclined to regard his new attendants as a friendly party interposed between himself and his fancied enemies ; but were he disposed to consider them as the agents of the latter, the sight of others similarly situated with himself and all under the care of the same individuals, corrects the false impression, and convinces him that he is among those who have other cares and designs than such as refer exclusively to him. His disposition to dwell entirely on his own case is gradually weakened ; other scenes and objects gain access to his mind ; and the way is prepared for a healthier train of associations.

Secondly, in those cases where the patient imagines himself endowed with superior power, or other extraordinary attributes, home is a source of perpetual annoyance and irritation. He finds that his authority is not recognised, his commands are not obeyed, and no one addresses him by his titles of power and distinction. His spirit is chafed by the disobedience and rebellion of those from whom he naturally expected the readiest submission, and consequently he refuses to receive from them the attentions which his case requires. They are his subjects, the instruments of his will, and he is as unable to comprehend their right to control his movements, as they are to enforce a compliance with their wishes. In the hospital, on the contrary, he finds indeed, that his prerogatives are no more acknowledged than they were at home, but those around him have the means,

which his friends had not, of making him comply with their wishes by using the least possible amount of force. He gradually slides into that inconsistency so common with madmen, of regarding himself as a superior being, while he readily yields to all their requirements, and observes the rules of the place.

Thirdly, it is always difficult and frequently impossible to place upon the maniac, in the bosom of his own home, the restraints which his condition may require. The head of a family will not bear to be controlled in the very place where he feels himself to be supreme, and the lunatic child seldom finds in the parental heart torn by apprehension and sorrow, that degree of firmness which would check the outburst of his irritated spirit. In his own family the maniac takes advantage of the tender relations existing between himself and those about him, to indulge his caprices and give free course to his passions. He feels none of that firm but gentle influence that checks his turbulence by means of a timely word or look, and awakens and confirms his remaining power of self-control. In the presence of strangers who treat him with uniform kindness, who never acknowledge the reality of his delusions, and are never turned from their purpose by his threats or violence, he learns to restrain himself and thus accomplishes the first step in his progress to recovery.

Fourthly, in the stage of high maniacal excitement where the mind is under the dominion of a blind fury, much unnecessary force must be used in restraining a patient, for want of those means and appliances, and that practical skill on the part of the attendant which can only be found in establishments devoted expressly to this purpose. Instead of only irritating him by the constant presence and interference of several individuals, and exciting him to incessant struggles to free himself from his fancied tormentors, he is there subjected to some mechanical restraint which easily and silently effects the object, or is placed in a strong, comfortable room where he may expend his fury by himself, and at the same time receive the attention that his condition requires. In families that are provided with

scarcely any more houseroom than is sufficient for the most ordinary necessities, as is the case, with a large portion of the inhabitants of this State, the condition of the maniac is truly deplorable. Exposed to the gaze of every one who enter the house, hearing every thing that is said, and seeing whatever is transacted around him, even to the minutest concerns of the household economy, his mental excitement is increased thereby, and he is then annoyed by means of restraints as ineffectual as they are painful. To a family thus straightened for room, and struggling perhaps for the means of subsistence, the charge of a maniac becomes an intolerable burden, while he himself enjoys none of the comforts of which he is capable. The result of the matter is, that the poor sufferer is finally thrown upon the town, and confined like a beast in a cage, or chained to the floor, where he becomes rapidly brutalized and incurably deranged. To the poor man therefore whose pecuniary means are soon exhausted, the insane hospital provides a comfortable haven in which he may ride out the storm of his disorder in safety.

If it be so necessary to separate the insane from their friends and place them with strangers, the question is often asked why they may not be equally well taken care of in private families. There is a class of cases, no doubt, that might be so treated, provided there were found in the family that combination of qualities required for the discharge of this delicate duty. But how seldom do we meet with such families, and when we do their services command a price beyond the means of all but the most affluent part of the community.

It generally happens however, that the patient soon finds that he is a prominent object of care and attention; that persons are devoted entirely to his service; that his varying humors are consulted; and that numberless arrangements are made solely in reference to him. He takes advantage of his position, claims and often receives indulgencies unsuitable to his condition, and instead of being judiciously controlled, is allowed to follow the bent of his wild inclinations. Thus, being under no restraining influences, learning no lesson of self-con-

trol, the patients disorder, unless arrested by some spontaneous effort of nature, steadily proceeds from bad to worse.

Moral means, which are now so justly esteemed as of the first importance in the treatment of the insane, are to be obtained in the greatest perfection only in large establishments. Indeed, very much of what is called moral treatment consists in the general influence exerted upon the insane mind by the order and regularity with which the service is conducted. To rise in the morning and retire at night, to take food and medicine at certain hours; to sit at meals in the company of others with propriety and decorum; to wash and dress himself; and to observe certain rules which are made for the benefit of the whole,—all this requires some degree of self control, leads the patient to recognize the existence of common rights and privileges; awakens his respect for himself and for others; and thus constitutes the first, and perhaps the most important step in the progress to recovery. Nowhere is the force of example so strong, or generally so beneficial, as among the inmates of an insane hospital. The most excited and turbulent patient soon feels himself rebuked in the presence of others who are quiet and orderly. For the first time, he represses, or attempts to repress, his noise; he instinctively wishes to be like others; and ere long he falls into the common routine with which things move on around him. The beneficial effects of this routine upon the insane mind, is strikingly manifested in those old cases in which nearly every vestige of humanity has been obliterated by injudicious confinement in jails and alms-houses. Immured in dungeons or cages, till the light of day and the warmth of a fire are among the things that have almost faded from their memory, with limbs cramped and paralysed for want of motion, fed and treated like worthless brutes, they come at last to present the most degraded and loathsome forms in which suffering humanity can appear. No sooner are these wretched beings decently clothed and fed, and associated on equal terms with their fellow-men, and find that they are expected to conduct like them, than they begin to improve. From being more re-

ardless of the decencies of life than the beasts of the field, they recover their former habits of personal cleanliness; behave with propriety at the common table; and labor perhaps with the most exemplary diligence. Now, this change is accomplished, not by a long and persevering course of persuasion and entreaty, but chiefly by the example of their fellow-inmates, aided by a little timely encouragement and assistance from their attendants.

In order to restore the insane mind, it should be kept at rest—not unoccupied—but at rest from all those thoughts and cares and trials which over-excite its energies, and which are unavoidable while mixing indiscriminately with the world. This kind of rest can be best obtained only in large institutions like ours that furnish complete seclusion from the world without. This withdrawal from the numberless sources of excitement to which the patient was exposed, is alone sufficient, in most recent cases, to effect the restoration of the mind. It is but the affording to nature a fair chance for exerting its restorative powers, undisturbed by any of those influences which tend to maintain the mental disorder. Although seclusion is the main thing, it is not the only thing, otherwise these institutions would have no advantage over the dungeon and cage. It is the judicious combination of seclusion with the habits and practices of common life, and the gradual, cautious exercise of the mind on things least calculated to excite, upon which the success of the former depends. Especially should that seclusion and mental inactivity which are so necessary during the first stages of the disorder, be succeeded, in the subsequent stages, by employment of the mind in some sphere of activity, foreign to that in which the disorder was contracted.

The objection is sometimes urged, that to take a person, not yet a raving maniac, from the bosom of his home, shut him up with strangers, and surround him with madmen, is enough to drive a sound man mad. Very likely it might; but it does not follow that the treatment which would injure a sane man, must necessarily have the same effect upon an insane one. For the

very reason that their mental conditions are so different, they cannot be similarly affected by the same scenes. In the first or forming stage of insanity where the disorder is almost imperceptible, and the patient is merely conscious of some unusual thoughts or feelings, it might, in some instances, perhaps, hasten the development of the affection, by placing him where his companions are insane, and every arrangement and association have reference to insanity. This, however, would be its worst result, and could but seldom happen. As a general rule, patients are far from experiencing that moral shock which is alleged to be so likely to happen when the conviction first falls upon the mind that they are confined in a mad-house. The patient's home has not been so happy as the objection supposes, and the faces of strangers are a relief after the annoyance he has suffered from his friends. His mind is too much absorbed in its own thoughts and feelings, to be troubled by the presence of others however insane; and as it begins to recover its freedom, and the attention is drawn to what is passing around him, his companions are more likely to furnish him with mental occupation, than to produce distress and disgust. Very often nothing tends more to awaken a healthy train of associations, and bring the insane mind to a consciousness of its real condition, than the contemplation of others, equally or more insane. It must be considered too, that in well-regulated establishments, as the disease yields, the patient is removed from his first associates, and placed with such as have improved like himself, and where, of course, the outward influences are of a more congenial kind. So far, therefore, from believing that the patient is injuriously affected by the presence of other patients, I do not hesitate to say that the superiority of these institutions over private families, depends in a great degree on this circumstance alone.

The above considerations are applicable chiefly to recent cases, but the superior advantages of hospitals for the insane are no less certain, though of a different kind, in a large portion of those who are beyond the reach of recovery. These

unfortunate persons are either wandering about, a source of perpetual anxiety and trouble to their friends and of apprehension to their neighbors, or confined in cages or dark rooms, where cold and filth, bad air and want of exercise, scanty and improper nourishment, rapidly reduce them to the lowest point of human degradation. In the hospital, on the contrary, all their animal wants are properly provided for, they are unable to injure themselves or others, and their minds are occupied with suitable labor or amusement; in one word they have every comfort which their condition renders them capable of enjoying. Still, it does not seem to be generally understood, that in the establishment of insane hospitals, the object is no less to promote the comfort of the incurable, than to obtain the recovery of the curable. The notion is very common that every patient is brought here to be cured, and that if this cannot be effected, they may as well be removed; and in accordance with this notion, we have seen many a patient, comparatively happy, carried away to be again consigned to a filthy and wretched abode. The work of philanthropy is but half accomplished when only the curable insane are deemed to be proper subjects for hospital treatment.

Such are the facts which have led to the establishment of institutions devoted to the care and treatment of the insane, and their superiority over every other means is now universally admitted by those who have any acquaintance with the subject. We hope that our own hospital, the noble offspring of public and private munificence, will not have been reared in vain to a single individual who would be benefitted by its treatment.

It will be seen by Table 2, that of 41 old cases discharged, only 6 were cured, being equivalent to 14½ per cent., or 1 in 7 nearly; a result somewhat less than that obtained at the Massachusetts Lunatic Hospital, in which the cures of old cases during the time it has been in operation, has averaged 19½ per cent. It is a curious fact that while insanity is one of the most curable diseases, in its early stages, if properly managed, it becomes one of the least curable when it has continued many

months. It would seem as if the morbid action of the brain in which insanity arises, very easily becomes habitual, and thus resists the operation of curative means, or at least, requires a much longer application of them. This fact is either unknown, or disregarded, and we are obliged to contend with popular impression, as erroneous as it is common, that institutions for the insane have a kind of magical power over insanity, by which the oldest cases can be cured by a few months residence within their walls. And if by some great blessing of Providence such a case is occasionally cured, instead of exciting any emotions of gratitude towards those whose efforts have contributed to this event, it is too often regarded as a matter of course, which one had a right to expect. As a general rule, the longer a disease has continued, the longer the time required for its removal, if it can be removed at all; and the laws of nature cannot be controlled by the ignorance or impatience of men.

It appears from the reports of the last mentioned hospital, that the old cases that have recovered since it was opened, resided upon an average a little more than 8½ months. Our old cases, however, that have been discharged, were suffered to stay, upon an average, five months and eight days. Now it should be distinctly understood, that in old cases, the chances for recovery are small, that the longer the disease has continued, the longer will be the time required for its cure; and that in a large portion of cases, a *short* residence with us can only lead to disappointment and unnecessary expense. In many instances, towns have determined to give their insane poor, the benefits of a few months' residence with us. This is certainly a most commendable measure, but it is neither just to the institution, nor to the patient, to place him here, with the calculation of removing him at the end of a certain time, whatever may be the result of the experiment. The most that can be done, in so short a time, in the greater portion of cases, is to render the patient more comfortable, and improve his personal habits, all which is generally lost, soon after his removal from the hospital. "Three and even twelve months, says Dr.

Woodward, are considered too short a period to make a decided impression upon some chronic cases, that by a persevering application of medical, moral and intellectual means, will ultimately be restored." In a pecuniary point of view, it certainly must be more economical to give such cases a fair trial of hospital treatment, than to fix them at once, and forever as a life-charge upon the town, or their friends. We have had to witness the removal of some who were greatly improving, and would probably have recovered, merely because the time had expired for which the towns had voted to keep them here. An additional outlay of fifty or a hundred dollars would probably have restored them to health, and enabled them to support themselves, whereas now the most of them will become a yearly burden that will accumulate before they die to thousands of dollars. Table 8, in which we have compared the expenses of some of our old cases with that of an equal number of our last discharged recent cases, while in the hospital, should be pondered well by those who look at this matter solely in an economical point of view. It must be recollected too that these old cases are yet to be supported as long as they live, and some of them may be expected to live many years. In view of these facts then, we would say to towns, if you conclude to send us your insane poor, let not their term of residence be fixed beforehand, but be governed by the circumstances of each particular case, remembering that so long as there continues to be any improvement, we may hope for a final cure.

But it is in regard to recent cases, that we have most to deplore this impatience of friends which leads to a premature removal of the patient; because perseverance is so generally crowned with success. The signs of improvement are mistaken for those of recovery, and the fact of the strong tendency of insanity to relapse when the patient is prematurely exposed to causes of excitement, is but little known or heeded. Because the reason is no longer disturbed by delusions, and the patient craves employment; because the affections have revived and

memory fondly reverts to home with all its endearments, it by no means follows that the mind is fully restored. These, it is true, are favorable symptoms, but they are symptoms of improvement merely, not of recovery, as the result of removal generally proves. They indicate the approach of convalescence—or that stage of the disease in which seclusion and quiet are more necessary even than in any other, and that too in which injudicious management is more injurious than in any other. Instances of the lamentable consequences of the mistake in question have been painfully frequent with us during the past year. A notice of some of these cases may serve to deepen the impression we are desirous of making on this point. A man who had been six weeks insane before admission, had so far improved at the end of a month, that he became interested in whatever was going on around him, and worked the greater part of the day. At this time he was visited by his wife who found him raking hay. She concluded that he had stayed long enough, and accordingly removed him. In a few days he became so excited and violent as to frighten his family, and at the end of three weeks he was brought to us again. He improved for a season, then became stationary, and he seems now to be sinking into an incurable form of insanity. A young man was brought to the hospital in a state of high maniacal excitement which gradually passed off, and in three months' time, he had become perfectly quiet, docile, and disposed to labor. His friends visiting him about this time and finding him at work, came to the conclusion that if he were well enough to work, he was well enough to go home, and obtained his discharge. In ten days he was returned, having been so excited and wild that he was caged the greater part of the time he was absent, and although he finally recovered, it was full three months before he had regained the ground he lost. Another admitted shortly after the latter, and in a similar condition, was removed under similar circumstances. His friends could not comprehend why he might not work as well and improve as fast at home, as with us, and he too was removed. In about a month he was

returned worse than when he entered at first, having been caged most of the time, and now, five months afterwards, he has but slightly improved.

If minor degrees of improvement are so much misapprehended, it is not strange that convalescence should often be mistaken for entire and permanent cure. In the course of a single short interview, the patient manifests no sign of mental aberration, nor undue exhilaration of spirits, and in every respect appears like himself when well. It is impossible to convince the friends that the mind, though sound, is not strong, and cannot be exposed to causes of excitement without great danger of a relapse. Relying with presumptuous confidence on their own sagacity, our advice is listened to like a tale that is told, and forthwith the patient is removed. For a few days or weeks, they rejoice in the course they have taken, but in a large portion of cases, the sight of old friends, exciting conversation, and the revival of old associations, prove too much for the mind in its weakened condition, and soon the derangement returns in all its original severity. If we are entitled to any confidence at all, we claim it in regard to our opinions on this point. If the friends are better judges than we are as to the most proper time for removing a patient, then are they also more competent to direct the management of the case in its previous stages. Since, however, the latter are immediately entrusted to our management, what can be more inconsistent and absurd, than the idea that in the latter stage of the disease no farther dependence need be placed on our judgment. The fact is, that the convalescent stage is that in which there is most liability to mistake, and in nothing is the judgment of the physician more closely exercised, than in determining when convalescence ends, and perfect recovery is established. On a point so important and delicate as this, we conceive that our ample means of information render our opinion worthy of some consideration. If incorrect, it can, at the worst, merely occasion a few days' or weeks' unnecessary detention, and every one must know how much less an evil it is, to keep a patient too long, than to remove him too soon.

We would take the opportunity of saying a few words on a subject somewhat akin to the latter in its consequences,—we mean the visits of friends to patients. On no point have we found so little disposition to acquiesce in our views as this. With amazing confidence, the friends persist in declaring how sure they are that their visits cannot hurt the patient ; and many a time have we been obliged to permit an interview under the painful conviction, that in all probability, it would aggravate the mental disorder. We certainly do not covet the trouble of objecting to such visits, but since we so frequently see their mischievous effects, it becomes our duty to prevent them if possible, by plainly stating our reasons therefor, though at the risk of giving offence. In old cases, where we have no hope of cure, we have never discouraged them ; and in recent cases, before the period of high maniacal excitement is finished, or symptoms of improvement have appeared, we have not thought it worth while to offer much opposition, for though they may sometimes temporarily increase the excitement, yet the patient is too much under the influence of disease to be deeply affected. But from the period when the cloud that obscures the mental vision begins to disperse, and the mind is struggling into a dim consciousness of its true condition, to that when the stage of convalescence is firmly established, any intercourse with friends is liable to be followed by injurious effects. It would seem as if, while the mind is in this transition-state, if we may so call it, emerging from the darkness and confusion of disease into the clear atmosphere of health, the sight of near friends, by suddenly recalling a crowd of painful associations, or too rudely awakening the domestic affections, produced a degree of nervous excitement that the brain in its weakened, irritable condition, is unable to bear. None but those engaged in the care of the insane, can conceive how seriously they may sometimes be affected by the slightest circumstance that acts upon the moral affections. If the mention of a familiar name can agitate the whole frame, and the sight of a bundle of oid clothes from home give rise to the most distressing emotions, it may be easily conceived, if

one will but consider the matter, how much risk is run by interviews with friends. I do not mean that they always prove injurious, but as they do so in the larger proportion of cases, and we have not always the means of distinguishing between them beforehand, it becomes our duty to discountenance them in all. It must be considered too that the evil is greatly aggravated by the conversation of the friends who, instead of cheering and encouraging the patient by inspiring him with hopes of a seasonable recovery, and representing things as going on smoothly at home, often-times, by some strange obliquity of judgment, talk of nothing but misfortunes and grievances, and such like disagreeable subjects that should be kept as far as possible from his thoughts. This is a matter we cannot control, and the general promises of friends to abstain from all topics that might unpleasantly affect the feelings, we have found by painful experience, are little to be relied on. If it is as much as a patient can bear to meet his friends and hear only cheerful intelligence, it may well be conceived that when their communications awaken the most painful emotions, the mind must inevitably stagger under the shock. The letters of friends are liable to the same objections, unless they are of a cheering character; and even then there are cases where they had better be withheld. When judiciously written, however, they often prove highly beneficial, sometimes even in cases where a personal interview might have been hazardous.

The results of our labors, as appears from Table 2, have not been quite so successful as we could have wished, though not very different from those of most institutions during the first year of their existence. Our proportion of recoveries in recent cases, as indicated by our books, has been 71 per cent.; though if we make allowance for cases prematurely removed, it amounts to 85 per cent., which is the average of recoveries obtained in the New-England hospitals, generally. In old cases our recoveries amount to 14 $\frac{5}{8}$, which is about 5 per cent. less than the average of recoveries obtained at the Massachusetts Lunatic Hospital during the first eight years of its existence. It must

be borne in mind, however, that we have received every patient that has offered, a large portion of whom have been sent for a few months' time, and they have been removed at the will of those who placed them here. Our deaths have amounted to 7½ per cent. which is very nearly the average per centage of deaths at the last mentioned hospital, and considerably less than that at most other hospitals in this country.

To provide the insane with the means of occupation, is a matter of hardly secondary importance to that of furnishing them with food and comfortable lodgings. Activity is the law of our being, and its operation is not suspended by the presence of insanity. No one who has had occasion to observe the restlessness of the insane, their disposition to be constantly doing something, even though it were only mischief, would ever suppose that inactivity is particularly agreeable to their feelings. Indeed it would seem as if they were supplied with a surplus quantity of nervous energy which required to be consumed by some active employment. This probably is the principal reason why the insane, when closely confined, with nothing to exercise their powers, run down almost as fast, both in body and mind, as if they labored under no mental disorder. The idea of improving the mental faculties of rational people by confining them together in large numbers, without any means of bodily or mental exercise, would be not more absurd, than that of expecting to restore the minds of the insane by a similar treatment. Until quite recently, however, it was universally supposed, at least in practice, that the insane are incapable of any occupation but that of amusement. It was thought unsafe to trust them with edge-tools, and supposed that they had too little control of their delusions or passions, to be able to work to any advantage. It was reserved for our own generation to establish the truth, that useful labor is safe, practicable, interesting and remedial to a large portion of the insane. And why should it not be so? The most of them have their bodily powers unimpaired, and their minds being deranged only on certain subjects, may feel no less interest than ever in some form of industry, nor less ability to engage in it personally.

Acting upon views like these, and correctly anticipating the character and habits of the inmates of the institution, its founders wisely considered that a considerable quantity of land would prove a valuable, if not indispensable adjunct, in the promotion of its objects. Accordingly a farm of seventy-eight acres was purchased for the site of the hospital, with the idea that its cultivation would furnish the patients with a convenient and interesting kind of exercise. The experience of the past year has satisfactorily demonstrated the wisdom of the measure. Nearly all our patients who are disposed to work, being farmers, or somewhat acquainted with agricultural operations, no form of labor could be better suited than farming, to their tastes and capacities. As might have been expected, they manifested considerable interest in the farm, and though entirely optional with them to work or not, yet there have always been as many to answer the calls of the out-of-doors attendants, as they could well superintend. Thus engaged, without care or responsibility, in an employment that interests the mind while it furnishes wholesome exercise for the body, the incurable have been made more happy than they could be any other way, and the curable have promoted their restoration more rapidly than if they had been spending their time in idleness or mere amusement. In the latter class of patients, working on the farm has served to divert their thoughts from dwelling on their own case, and to awaken recollections of former days when their happiness was mainly the reward of their daily toils. Thus engaged in useful employment in company with rational men, receiving and giving directions, the distance between themselves and their more fortunate fellow-men is diminished, and a healthier tone of thought and feeling begins to be visible in their conduct and conversation. We have observed that one of the first and most satisfactory symptoms of approaching convalescence has been an increased interest in our farming operations. Having concluded in the Fall to break up our orchard and some other grass-land, a young man who, for more than three months, had been in a wild and reckless state, expressed a strong desire to

hold the plough, which, it seems had been a favorite employment. His desire was gratified, and early and late, he followed the oxen till the work was finished, (about six acres) and never was plough held better. From that time his mental condition began to improve, and in seven weeks, he was discharged cured. Of the 82 male patients that have been in the hospital in the course of the year, we find that 51 have worked regularly almost every day, and a few others have labored occasionally. It may be doubted if any other similar institution in the country has had a greater proportion of working-men. A shoemaker's bench and a joiner's shop have also furnished acceptable employment to some of our patients. When the weather has prevented out-of-doors employment, they have had recourse to cards, draughts, books and newspapers; and a set of leathern ninepins has served to fill up many an unoccupied hour.

The employment of our female patients has been chiefly knitting and sewing. Nothing, probably has contributed to promote their quiet, comfort and restoration so much as knitting,—woman's unfailling solace in hours of trouble. 170 pairs of stockings are the result of our female labor in this branch of industry alone. A few have been employed in the kitchen and laundry. Once a week, such as are able and willing have assembled in the matron's rooms, and in work, reading, conversation and singing, with a little fruit or cakes, the afternoon has passed pleasantly away, much to the increase of their self-respect and self-control. It has been our rule that every female patient in a suitable condition, should walk out in the open air once a day in pleasant weather. But as walking is out of the question a great portion of the year, it would be well if we could furnish our female patients the only other mode of exercise proper for them to take, that of riding, which is out of our power now, except during good sleighing, and only then with considerable inconvenience. Besides being obviously necessary to promote the bodily health, nothing contributes more to put them in good humor, and produce that cheerfulness of temper which strongly conduces to recovery, than riding. So

well is this truth now understood, that most, if not all the institutions for the insane in our country, are provided with carriages and horses for the use of the female patients, and their officers would probably rather dispense with any other kind of exercise than this. It is for the Legislature to decide whether this class of our inmates shall be mewed up in the galleries on some of the finest days in the year, or have it in their power to feel the invigorating effects of fresh air, and agreeable exercise.

We have already said that the means of mental occupation are hardly of less importance, than suitable food and lodgings. For this reason we have approved of the policy of cultivating a farm; for this reason, we have suggested the purchase of a carriage for the use of our females; and now for the same reason, we would advocate the gradual formation of a library. The mere shutting up of an insane man within the four walls of what is called an insane hospital, exerts no magical influence over his disease. The curative powers of these institutions consist in the judicious application of moral means among which reading ought always to hold a prominent place. It does not follow, that he is unable to read, or has lost his taste for reading. If it were ever a source of gratification and comfort to him, it is doubly so now. When we consider that these unfortunate people are taken from their homes and pursuits; withdrawn from the world, and more or less confined to the house, we may well conceive with what eagerness they seek for books, and how beneficial must be their influence. They not only furnish occupation for many an idle hour, but they greatly promote the recovery of the insane mind by withdrawing it from the contemplation of its own morbid fancies, fixing it upon other thoughts and scenes, and thus preparing it for healthier trains of reflection. The larger portion of our patients spend more or less time every day in reading, and I do not doubt that they are rendered happier and better for it. The officers have supplied them with books from their own libraries, but they are not exactly the kind best suited for their purposes.

A small but suitable collection of books seems to be one of the essentials in the economy of an insane hospital, and we trust that we shall not long be permitted to feel the want of it. In this connexion we would present our thanks to the editors of the *Maine Temperance Gazette*, of the *Piscataquis Herald*, and of the *Olive Branch*, who have gratuitously sent us their papers, and to those of the *Age* and the *Kennebec Journal*, for most liberal supplies of their exchange papers.

In pleasant weather, a number of our male patients have attended church in the village, and on sabbath evenings we have had a religious service which has generally been conducted by some clergyman in the vicinity. About three fourths of our patients have usually attended, and though some of them, no doubt, have been little improved thereby, yet, I have no hesitation in saying that, on the whole, the effect of the service has been highly beneficial. It is well to permit the insane to continue their usual customs, duties, and modes of life, just so far as they are compatible with the police of the institution and with the means made use of for their recovery. Generally speaking, the more they are suffered to act like other men, the more they will strive to become like them. To attend divine service on the sabbath is one of those observances of ordinary life which a large portion of them are anxious to maintain, and to some it is a source of heartfelt joy. Many attend merely to change the scene, without caring for the religious influences of the occasion, but even with such it is not without its benefits. It serves as a powerful motive to self-control, and it is curious how admirably some control themselves there who never do it any where else. This is something gained, and if it constituted the principal benefit of religious services, this would be a sufficient inducement for continuing them. To that class of patients to whom the "earth seems a sterile promontory, and this brave o'erhanging firmament to be nothing but a foul and pestilent congregation of vapors," the services of the sabbath are sometimes directly beneficial. Cheering views of divine Providence, and exhibitions of the parental character of God, are, in some

instances as efficient as any means we have to encourage and confirm the desponding spirit. Convalescent patients, softened by sickness, and penetrated by a sense of divine goodness, are in just that condition of mind to be favorably affected by the truths of religion. To the clergymen of this vicinity, Doctor Tappan, Messrs. Warren, Barnard, Jenne and Freeman of Augusta; Cole, Thurston, Butler, Gunnison, and Adlam of Hallowell; Messrs. Adams of Portland and Sewall of Baltimore, Md., our thanks are due for the cheerfulness and promptness with which they have always complied with our request to officiate for us.

It may be proper, perhaps, to mention the general principles by which we are governed in the moral treatment of our patients. In all our intercourse with them we endeavor to treat them with gentleness mingled with firmness, dealing with them candidly and openly, and scrupulously observing every promise. Their foolish whims, their unbridled passions, and their turbulent movements, must be met with an unyielding firmness, tempered by a spirit of gentleness which softens a restriction and calms the rising tumult. Any thing like severity or harshness is out of place in the treatment of the insane, for kindness and good humor will often accomplish our object, when the opposite qualities would only serve to exasperate the patient and confirm him in his course. As a continual dropping of water weareth away a stone, so the unceasing observance of kind and gentle manners towards the insane, will gradually soften the fiercest temper, and awaken long forgotten feelings of self-respect and good will. Indeed, if the common impulses of humanity did not prompt us to treat them with unvarying kindness, the fact that such treatment renders them far less troublesome, would be sufficient for the purpose. Under no circumstances are our attendants permitted to inflict a blow, or address a patient in a sharp, authoritative, or uncourteous manner. Restraint is sometimes necessary. The patient must not be suffered to injure his person or his clothing, nor those of others; nor to mar, destroy, or molest. Our means of

restraint, however, are so well contrived and adjusted, that they effectually accomplish our purpose without causing the slightest pain, and with the least possible degree of annoyance. No restraint can be applied, except by order of an officer ; and whenever any is required, our standing rule is to apply no more and continue it no longer than is absolutely necessary. The patient is made to understand that it is not applied as a punishment—this has no place in our moral treatment—but is merely a necessary means to prevent him from committing injury. Every indulgence at our disposal likely to promote their comfort, is freely given, until forfeited by an abuse of our confidence ; to be granted again when they have shown themselves worthy of another trial by a course of correct behavior. As soon as a patient becomes aware of this rule, he places a double guard upon his conduct, and is thus actuated by a powerful motive to self-control. We endeavor always to bear in mind that our patients are an unfortunate class of our fellow-men strongly entitled to our sympathy and regard. While we let them understand that we have no faith in their delusions, that we think lightly of their complaints of their friends, and disregard their abuse of ourselves, we refrain from any remark upon the weakness of their intellect, or the perversity of their moral affections. When the patient, by some strong effort of self-control, has behaved with unusual propriety, we take care that he shall have due praise therefor, and rewarded, if possible, with some little indulgence, or privilege.

Above all things, in order to obtain the confidence of our patients, we find it necessary to abstain from every form of deception in our dealings with them. Nothing irritates an insane person, or paralyses the efforts of others to help him, more than deception, which, with his strong disposition to suspicion, inevitably makes an unfavorable impression upon his mind. Whenever he discovers it, and sooner or later he will, he regards the author of it as one of his enemies who are banded together to deceive, tease and harass him. If people were generally aware of this trait in the insane, they would be more

cautious how they endeavor to gain the smallest point by any other than honest and straight-forward means. Scarcely a patient is brought to us who has been correctly informed respecting the nature of the place he is going to, or how long he is to remain. He is generally beguiled with the idea that he is going to an elegant hotel or boarding-house, where he will be waited upon by a plenty of servants, drive about wherever he pleases, and every wish of his heart will be gratified. The consequence is, when he discovers the deception, that he imbibes an aversion towards his friends that may not be very easily overcome, and looks upon us as parties to the wrong that has been done him. Thus, at the very outset, we are met by a serious difficulty which it may require weeks or months for us to remove. The case, I think, could seldom happen, in which it would not be far better to encounter a little more resistance, or use a little more force, than to practise a deliberate, systematic deception. The former irritates, but it is soon over; the latter, remains and rankles. It is a cardinal principle in our moral treatment to deal with our patients fairly, honestly and candidly, for we believe that no temporary advantage can counterbalance the mischief that inevitably arises from deceit. When a new patient comes in, we let him know where he is, and for what purpose he has come. He is requested, in the language of kindness and regard, to conduct with propriety, and assured that the number and kind of his privileges will depend upon the manner in which he uses them. Instead of meeting his unreasonable requests and troublesome inquiries by a tissue of petty deceptions, we prefer telling him the plain truth, and giving him our undisguised opinion. It may produce a little irritation at first, but it saves us from the infinite trouble and vexation which are sure to arise from pursuing the opposite course. The moment a patient discovers that we have been deceiving him, his respect for us is gone, and our moral influence over him is at an end. If he is cured under such circumstances, it is more by the restorative powers of nature, than by any good influences of the physician. In one word, we endeavor always

to treat our patients, as every honorable, well bred man treats another in the common intercourse of society.

I should be doing great injustice to others, as well as to my own feelings, were I to close this report, which I fear has extended to an unwarrantable length, without gratefully acknowledging my obligations to those who are associated with me in the management of the institution, for their cordial co-operation in all my measures, as well as for the faithful discharge of their specific duties. To our assistant physician, Dr. Booth, who acted as Superintendent from 14th of April to 12th of August, great praise is due for the very judicious manner in which he discharged his trust. If we deserve any credit for our labors, he is justly entitled to a liberal share of it.

I. RAY, *Superintendent.*

Maine Insane Hospital, Augusta, December 31, 1841.



Extract from the "Regulations" of the Hospital.

ADMISSION OF PATIENTS.

Patients admitted to the institution must come provided with at least two strong cotton shirts—a coat, vest, and pantaloons, of strong woolen cloth—two pairs of woolen socks or stockings—one black stock—a hat or cap—and one pair of shoes or boots.

The females must have at least the same quantity of under clothes, including shoes and stockings, a decent bonnet, and two substantial dresses. In both cases, the articles must be new and in good condition. The woolens must be of a dark color.

The patients offered for admission must be perfectly neat and clean in their persons, and free from vermin and infective diseases.

The price of boarding, washing, medicines and attendance, shall vary according to the trouble and expense incurred, in the judgment of the Superintendent, not to exceed three dollars, nor be less than two dollars, per week.

Before any patient shall be received into the institution, except when sent by towns, a good and sufficient bond will be required for the payment of all expenses that may be incurred for each patient, including board, and such articles of clothing as it may become necessary to furnish.

For the admission of patients sent by towns, a written request for such admission, signed by the Overseers of the Poor, will be required.

FORM OF BOND.

KNOW ALL MEN BY THESE PRESENTS, That we, ———, of ———, in the County of ———, as principal, and ———, of ———, in the County of ———, as sureties, are held and bound unto ———, Steward of the Insane Hospital, at Augusta,

or to his successor in said office, in the sum of ————, to the payment of which sum, well and truly to be made to him, the said ————, or to his successors in said office, we bind ourselves, our executors and administrators, firmly by these presents.

Sealed with our seals, and dated at ————, this ———— day of ————, A. D. ————.

The condition of the above obligation is such, that whereas ————, of ————, in the County of ————, is about to be admitted as a boarder and patient to the institution aforesaid; now if the said ———— shall pay to said ————, or to his successor in said office, such sum per week, for the board, washing, medicine, and attendance, according to the trouble and expense incurred for said patient, in the judgment of the Superintendent for the time being, not to exceed three dollars, nor be less than two dollars, and pay for all such necessary articles of clothing as shall be furnished said ———— by the said ————, or his successor, and remove the said ———— from said institution, whenever they shall be thereto in writing requested by the Superintendent for the time being—and shall also pay a further sum, not exceeding fifty dollars, for all damages that may arise from injury to the furniture and other property of said institution, by said ————, and for reasonable charges that may be incurred in case of the elopement of said ————; payments to be made semi-annually and at the time of removal, with interest on the amount after it becomes due as aforesaid; then this obligation to be null and void—otherwise to remain in full force and virtue.

The following is the statute referred to in the Report of the Directors :

“ If any such poor and indigent person be insane, the said overseers shall, either wholly or in part, with the assistance of the friends of such person, cause him to be removed to, and provide for his support in, the Insane Hospital of this State : Provided, that he can, under the regulations of the Hospital

for the time being, be admitted therein; and that, in the opinion of the Superintendent of the Hospital, or of such physician as he shall depute to make an examination into the case, the insanity of such person be such that he will derive benefit from a residence therein. And the said Superintendent shall appoint a suitable physician, as near as may be to the place of residence of such insane person, to make such examination, the expense whereof shall be paid by the town to which such person is chargeable for support."