

MAINE STATE LEGISLATURE

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FORTY-EIGHTH LEGISLATURE.

HOUSE.

No. 1.

STATE OF MAINE.

EXECUTIVE DEPARTMENT, }
Augusta, January 16, 1869. }

To the Senate and House of Representatives :

I have the honor to transmit for your consideration the Report of the Superintendent of the Insane Hospital upon the condition of idiotic and demented patients at that Institution, made at the request of the Governor and Council, in pursuance of the Resolve of March 7th, 1868, directing them to investigate this matter.

J. L. CHAMBERLAIN.

REPORT.

MAINE INSANE HOSPITAL, }
 Augusta, April 30, 1868. }

To Hon. J. A. SANBORN, *Chairman of*
Committee on Insane Hospital:

DEAR SIR,—I am in receipt of your communication of the 27th ult., transmitting Resolves of the Legislature relative to this Institution, and asking for “the exact number of idiotic and demented persons now in the hospital who are entirely incurable,” with such other information as may appear to me “would aid the Governor and Council in prosecuting the inquiries contemplated in the resolves,” and in reply, I would say:

There are now 310 patients in the hospital—149 men and 161 women. Of these, 241—113 men and 128 women—are suffering apparently from chronic, incurable insanity, 197 of whom—89 men and 108 women—are more or less demented, and dangerous either to themselves or others, or destructive to clothing and other property; while the balance, 44—24 men and 20 women—are idiotic and demented, and are to all appearance harmless, though the latter condition I should be slow in warranting, knowing as I do the changes and freaks which the disease in its onward course is liable to assume. The terrible incendiary fires, and the most horrible homicides which from time to time, in their detail, shock a whole community, are often but the offshoots of brains undeveloped and diseased, acts of the idiotic, the demented, the imbecile, or the “non compos mentis.” They are, I apprehend, a sufficient commentary to render the most experienced cautious in pronouncing with much assurance upon the harmlessness of idiotic and demented persons.

The large per cent. of chronic incurable cases now in the hospital, arises mainly from the long continuance of the disease prior to their being sent to the Institution. Many are retained at home until every expedient has been tried for their restoration, and the hospital thus becomes only the dernier resort after the disease has assumed a dangerous type, and the patient becomes unmanage-

able and incurable. The first thought of placing an insane person in the hospital is too often suggested by the appearance of some alarming or dangerous symptom, some violent outbreak, some suicidal or homicidal demonstration. The individual may have been acknowledged insane for years by everybody, but considered so harmless as not to need restraint. Municipal officers generally are not in the habit of sending their insane to the hospital when they can be kept at home with safety and a little pecuniary advantage. But few of the 241 incurable cases above mentioned, especially those supported by towns, would be continued in the hospital if they could be kept as cheaply, as comfortably, and as safely elsewhere.

Few questions in social science have attracted more attention than the one relating to the best means of providing for the care and treatment of persons deprived of reason. From the period when the immortal Pinel and his cotemporary, Tewke, began the great reform in the treatment of the insane, by removing from the maniac his clanking chains, down to the present time, has the philanthropist been searching for the best method by which the greatest good can be done to the largest number of this unfortunate class.

The first and paramount problem to solve has been, and still is, how can these afflicted ones be cured of their terrible malady? and second, what is the best way to provide for their comfort and happiness when found beyond the reach of recovery?

The resolves before me having no reference to the former question, but contemplating the latter, in accordance with your wish and approbation, I propose to offer a thought or two by way of suggestion upon this particular point.

In the very infancy of our system of hospitals for the insane, the question of providing asylums exclusively for the incurable was thoroughly considered and put at rest by the good sense of those having the best interests of the insane at heart, and there it has remained through the lapse of nearly a quarter of a century. It now is being rejuvenated, and comes up again for consideration.

As there has been no new light developed to show why such institutions should be established, the same reasons as then prevailed why they should not be instituted, why they would not so well accomplish the object desired, are still sound and potent.

And here allow me to borrow the language of an eminent alienist, the late Dr. Brigham, for a long time at the head of the State

Lunatic Asylum at Utica, N. Y., as it will best present my own views on the subject before us. In 1844, the doctor utters the following :

“Some benevolent individuals noticing the deplorable situation of the incurable insane, who are confined in poor-houses, and having seen the comfortable condition of deranged persons in well conducted lunatic asylums, have proposed that public asylums should be built, on a cheap plan, solely for those supposed to be incurable.

“After much consideration, we are constrained to oppose such arrangements. Establishments solely for the poor and incurable would, we believe, soon become objects of but little interest to any one, and in which neglect, abuse, and all kinds of misrule would exist, and exist without detection. We are opposed to them principally on these grounds :

“1. No one can determine with much accuracy which patients are and which are not incurable. Of those in this asylum, we cannot say of at least one third to which of these classes they belong. We still indulge hopes of their restoration, but probably shall be disappointed in a majority of them.

“But the hope we have, and which encourages us in our efforts to cure them, would be destroyed by sending them to an incurable establishment. The fact that the chances of recovery would be diminished to even but a few, is enough to make us hesitate before we establish such asylums.

“2. Many that are incurable are monomaniacs. They are deranged but on one or two subjects, and sane on others. Such surely should not be deprived of any comforts that are afforded the curable class, among which the greatest is *hope* of again being restored to society, which would be destroyed if they were sent to an incurable asylum. Equally or more strongly does this objection apply to cases of remission, to those numerous cases in which insanity is exhibited for a week, and followed by several weeks of sanity. Shall these be told there is no hope for them ?

“3. Among the incurable insane there would be no certain means of ascertaining the neglect or abuse of them. In all asylums, the fact that some are well, and soon to leave the asylum, is the greatest safeguard against abuse.

“4. No possible good could arise from such distinct asylums, except they might be conducted at less expense. But how so, if they are to have proper officers, physicians, &c., and if they do

not, why are they better than poor-houses? There are no facts in favor of such establishments. * * * *

“ We hope never to see such institutions in this country. On the contrary, let no asylum be established but for the curable, and to this the incurable and the rich and the poor should be admitted; let all have the same kind care, and all indulge the same hope, even if delusive to many, of ultimate recovery, but do not drive any to despair, and destroy the little mind they still possess, by consigning them to a house over the entrance of which Dante’s lines on the gates of hell might well be inscribed,

‘ Lasciate ogni speranza
Voi che intrate qui.’

‘ Leave hope behind all ye who enter here.’”

This, it seems to me, embraces the whole philosophy of the subject.

My idea of the true way to provide for the insane, is to combine the hospital and asylum in one, on a liberal and humanitarian scale, with suitable apartments for a proper classification of all, curable and incurable, who may desire its benefits. Anything short of this would, I believe, be a step backward towards the primitive mode of caring for these unfortunate persons, which once taken, the descent would be easy and rapid.

An intermediate establishment, a sort of half-way house, could be instituted, and perhaps conducted on a cheaper plan than the system of the present institutions, but the poor inmates would receive, I apprehend, a “quid pro quo”—the treatment would necessarily have to be lowered.

Let us glance a moment at the subject in a pecuniary point of view. The policy of the State towards this Institution has always been most liberal, scarcely a single appropriation that has been asked has been refused, and yet it has cost the State only about \$900 for each bed, and only a fraction over \$1,000 to a bed, *including all medical attendance, the services of Trustees, and all other officers.*

I apprehend that none but a misanthrope or the most sordidly selfish can object to this expenditure. Who else could complain? Who else would be unwilling that a thousand dollars should be drawn from the public treasury to furnish house, lodging, medical attendance, and such other general good comfort as a well regulated hospital affords to an insane person, even though his disease

should last a lifetime, and with how much less reason could one complain when a restoration of mental soundness may be expected.

For \$275,000 (the amount which the State has appropriated exclusive of the loss by fire, for accommodation of its insane) 3,174 persons have enjoyed the benefits of an Institution that will compare well with any other in the country. Of these, 1,310 appeared to have been restored to their former mental health, and more than 500 greatly benefited.

I cannot believe there is a man, woman or child in whose breast burns a spark of benevolence, who would desire to lower the treatment of any insane person, even the incurable. It is my impression and full belief, that the true policy of the State towards this class of the community, is to pursue the same course it has hitherto pursued for the last thirty years—to provide liberally for all insane who desire the benefits of hospital treatment, whatever be their condition, curable or incurable.

Let the original plan of the hospital be carried out—the new contemplated wing for males be erected, and so complete the architectural symmetry of the building. Then there will be accommodations for 350 patients—male and female, and the demands of the State in this direction would be supplied for the next decade of years. If, then, further accommodations should be needed, the “Cottage” system could be added to the present establishment, sufficient for fifty more of each sex. This would raise the number to 450, which is but little larger than that in the several State Hospitals in Mass. at this time, and considerably less than the number in several other State Hospitals in this and other countries.

At the State Lunatic Hospital in Worcester, Mass., there are 389 patients; in the Lunatic Hospital at Taunton, Mass., 379; and at the Lunatic Hospital at Northampton, same State, 413. At the N. Y. State Lunatic Asylum at Utica they have 641 patients; at the N. Y. City Lunatic Asylum, 767; King’s Co. Lunatic Asylum, Flatbush, N. Y., 516; N. J. State Lunatic Asylum, Trenton, 450; Penn. Hospital for Insane, Philadelphia, 344; Penn. State Lunatic Hospital, Harrisburg, 340; Iowa Hospital for Insane, Mt. Pleasant, 344; Vermont Asylum, Brattleboro’, 480; Insane Asylum for Cal., Stockton, 769; Provincial Lunatic Asylum, Toronto, Ca., 467.

One of the propositions adopted at the Annual meeting of the

IDIOTIC AND DEMENTED PERSONS.

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Association of Medical Superintendents of American Institutions for the insane in 1866, reads as follows :

“The enlargement of a city, county, or State institution for the insane, which in the extent and character of the district in which it is situated is conveniently accessible to all the people of such district, may be properly carried as required to the extent of accommodating 600 patients, embracing the usual proportions of curable and incurable insane in a particular community.”

I am, sir,

Your obedient servant,

H. M. HARLOW.

STATE OF MAINE.

In HOUSE OF REPRESENTATIVES, }
January 19, 1869. }

Read, and on motion of Mr. DICKEY of Fort Kent, 300 copies
ordered to be printed for the use of the House.

S. J. CHADBOURNE, *Clerk.*