

# MAINE STATE LEGISLATURE

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**PUBLIC DOCUMENTS**

OF THE

**STATE OF MAINE**

BEING THE

**REPORTS**

OF THE VARIOUS

**PUBLIC OFFICERS  
DEPARTMENTS AND  
INSTITUTIONS**

FOR THE TWO YEARS

**JULY 1, 1926 - JUNE 30, 1928**

TWENTY-SIXTH AND TWENTY-SEVENTH

ANNUAL REPORTS

OF

BANGOR STATE HOSPITAL



FOR THE

YEARS ENDING JUNE 30, 1927

AND JUNE 30, 1928

## BANGOR STATE HOSPITAL.

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 EDWARD W. RUSSELL, M.D., Assistant Superintendent.  
 MAX E. WITTE, JR., M.D., Senior Assistant Physician.  
 ANDRE L. DUCHARME, M.D., Junior Assistant Physician.  
 HERBERT A. LICHTENSTEIN, D.M.D., D.D.S., Dentist.  
 WILLIAM THOMPSON, Steward and Treasurer.

## CONSULTING PHYSICIANS AND SURGEONS.

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DANIEL McCANN, M.D.	A. K. P. SMITH, M.D.
JARVIS B. WOODS, M.D.	BLANCHE M. MANSFIELD, M.D.
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## SUPERINTENDENT OF NURSES.

MARY I. COLLINS, R.N.

## SOCIAL SERVICE WORKER

EILEEN MATCHETT, R.N.

## OCCUPATIONAL THERAPIST.

NETTIE REEVES.

## MATRON—DIETITIAN.

CHARLOTTE S. NEWELL.

## SUPERVISORS.

## FEMALE.

ISABELLE PERRY, R.N.  
 MAUD C. RAND, R.N.  
 MARGARET ROYAL, R.N.

## MALE.

EDWARD W. BRALEY.  
 ROBERT D. REID.  
 SAMUEL MARSH.

## CHIEF ENGINEER.

WILLIAM J. HUGHES.

## REPORT OF THE SUPERINTENDENT

*To the Board of Hospital Trustees:*

Herewith I submit the Superintendent's report of the operations of Bangor State Hospital for the biennial period ending June 30, 1928.

## MOVEMENT OF POPULATION.

The year ending June 30, 1927, began with 779 patients on the books of the hospital; 407 men and 372 women. These figures include 739 patients in the hospital and 40 patients out on parole. The total number of patients admitted during the year was 215; 124 men and 91 women. The average daily number of patients in the hospital during the year was 756.19; 400.62 men and 355.57 women. The average daily number on parole was 41.9. The total number of patients under treatment for the year was 994; 531 men and 463 women.

The year ending June 30, 1928, began with 822 patients on the books of the hospital; 422 men and 400 women. Of these 760 patients were in the hospital and 62 were out on parole. The total number admitted for the year was 238; 142 men and 96 women. The average daily number of patients actually in the hospital during the year was 776.58; 408.48 men and 368.1 women. The average daily number out on parole was 69.38. The total number of patients under treatment during the year was 1060; 564 men and 496 women. The total number of patients in the hospital at the end of the biennial period was 783; 413 men and 370 women. The total number of patients out on parole at the end of the period was 60; 21 men and 39 women. The total number on the books of the hospital on June 30, 1928, was 843; 434 men and 409 women.

The largest number of patients in the hospital on any day during the biennial period was 789 on March 10, 1928. The normal capacity of the hospital is for 640 patients and as the daily average for the year ending June 30, 1927, was 756.19, and for the year ending June 30, 1928, 776.58 or an

average of 766.38 for the biennial period, there was an average of 126 more patients in the hospital than the normal bed capacity provided for.

The new wing for male patients which is now under construction will accommodate 165 male patients, and 37 employees who are now largely occupying rooms intended for patients in the other buildings. The new wing also contains occupational therapy departments, and a large dining room for 200 patients which will release rooms formerly used for these purposes in the other buildings and this will increase the total capacity of the institution from 640 to 893, an increase of 253 beds.

The increase in the average daily number of patients in the hospital during the biennial period over the daily average of the previous two years was 25.88.

#### DISCHARGES.

During the year ending June 30, 1927, there were 85 patients discharged as follows: 42 as recovered; 32 as improved; 11 as unimproved; and 8 transferred to other institutions.

During the year ending June 30, 1928, there were 110 patients discharged as follows: 70 as recovered; 36 as improved; 4 as unimproved; and 8 transferred to other institutions.

The discharge rate on the number admitted for the biennial period was 39.5% excluding transfers to other institutions.

#### DEATHS.

The total number of deaths for the year ending June 30, 1927, was 79; and there were 99 deaths during the year ending June 30, 1928. The percentage of deaths of the total number of patients treated during the two years was 8.6 per cent. Causes of deaths: Typhoid fever 1; paratyphoid 1; diphtheria 1; erysipelas 2; lethargic encephalitis 1; tuberculosis 23; septicemia 5; cancer 4; brain tumor 1; diseases of spinal cord 4; cerebral hemorrhage 5; general paralysis 23; epilepsy 5; cerebral syphilis 1; endocarditis and myocarditis 9; angina

pectoris 2; arteriosclerosis 59; broncho pneumonia 11; lobar pneumonia 5; cirrhosis of liver 1; peritonitis 1; nephritis 2; cystitis 1; amyotrophic lateral sclerosis 1; acute cardiac dilation 2; mitral stenosis 2; mitral insufficiency 5.

The majority of those who died were advanced in years, 37 being between 60 and 70 years of age, and 65 over 70 years old. The large number of deaths caused by tuberculosis is due to the fact that mental patients suffering from tuberculosis are transferred from the other state institutions to the pavillion for tubercular patients at this hospital.

#### FIRST ADMISSIONS.

The first admissions include all patients admitted who never before have been treated in any hospital for mental patients. This group, therefore, represents the number of new cases appearing yearly in the community which require institutional care. During the two years, 365 first admissions were received, an increase of 52 over the number received during the previous biennial period. The first admissions represent 80 per cent of all admissions to the hospital.

Fifty-three patients, or 28.19 per cent of the first admissions were 60 years of age or over when admitted. The percentage of old people who break down mentally and who are sent to this hospital for treatment is gradually increasing at the rate of approximately one per cent of the first admissions per year. This increase in admissions of old people is due to several causes. First, the average length of life in Maine has increased from 40 in 1890 to 58 in 1928, and consequently as more people reach an advanced age, more people break down mentally from arteriosclerosis and senility. Second, under our social order of living with an increasing tendency for young people to leave their homes it is becoming more and more difficult for the communities to care for old people suffering from physical and mental infirmities and they are therefore sent to state hospitals for treatment. The abolishment of the almshouses, free state care for all indigent mental patients, and the fact that the patients in the state hospitals are receiving better and better care as people are becoming more liberal with this class of dependents and the

fact that mental patients are cared for at less expense at the state hospitals than they are cared for at home are other factors which tend to increase the number of mild mental patients which are sent to the state hospitals.

PSYCHOSES OF FIRST ADMISSIONS FOR TWO YEARS  
ENDING JUNE 30, 1928.

	M.	F.	T.	Per cent
Traumatic psychoses	1		1	.274
Senile psychoses	31	17	48	13.15
Psychoses with cerebral arteriosclerosis	28	5	33	9.041
General paralysis	21	12	33	9.041
Psychoses with cerebral syphilis	4	4	8	2.182
Psychoses with Huntington's Chorea				
Psychoses with brain tumor				
Psychoses with other brain and nervous diseases	5	3	8	2.182
Alcoholic psychoses	16		16	4.382
Psychoses due to drugs and other exogenous toxins	1	2	3	.822
Psychoses with Pellagra				
Psychoses with other somatic diseases	5	5	10	2.74
Manic-depressive psychoses	14	21	35	9.59
Involution melancholia	3	14	17	4.66
Dementia praecox	22	21	43	11.78
Paranoia and paranoid condition	2	2	4	1.096
Epileptic psychoses	6	7	13	3.561
Psychoneuroses and neuroses	12	14	26	7.156
Psychoses with psychopathic personality	1		1	.274
Psychoses with mental deficiency	4	4	8	2.182
Undiagnosed psychoses	1		1	.274
Without psychoses	42	15	57	15.613

	M.	F.	T.	Per cent
Epilepsy	0	0	0	
Alcoholism	4		4	1.095
Drug addiction	6	1	7	1.917
Psychopathic personality	8	3	11	3.013
Mental deficiency	17	11	28	7.671
Others (no mental disorder)	7		7	1.917

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Total first admissions . . . . . 219 146 365

MEDICAL WORK.

With the exception of two cases of typhoid fever a few cases of paratyphoid fever and a few cases of diphtheria,



the hospital was unusually free from epidemics and infectious diseases. One of the two typhoid fever cases had typhoid fever when sent to the hospital and the source of infection of the other case of typhoid fever and the paratyphoid cases were two employees who handled food and were found to be paratyphoid and typhoid carriers.

Several patients of the senile type sustained fractures of the hip, fractures of the leg or of the wrist as a result of falling to the floor, which are very common accidents in the aged and feeble.

As in former years, staff meetings have been held regularly three times a week. After a complete and thorough physical and mental examination each new admission is brought into staff meeting for confirmation of the examination, diagnosis, and consultations as to treatment. When the patients have improved or recovered mentally to such an extent that it may be for their best interest to leave the hospital they are again brought into the staff meetings for re-examination and consideration for parole, or discharge.

The conditions at home, such as family environment, the prospect of a position and future employment are also carefully considered at the staff meeting before the patient is allowed to leave the hospital.

The hydro and physiotherapy departments have been doing their usual good work. From fifteen to twenty patients are treated in each of these departments daily.

#### OCCUPATIONAL THERAPY.

This department is functioning well under the skilled direction of Miss Nettie Reeves. Occupational therapy is of utmost importance in the treatment of mental patients. The best possible way to divert a patient's mind from morbid channels is to arouse his interest in some new and useful occupation which compels him to concentrate, and thus enables him to take his mind away from himself and his morbid delusions and again begin to use it in a normal and healthy manner.

Beside the therapeutic value of occupations this department also contributes financially toward entertainments and

amusements for the other patients. Many toys and useful articles are made, such as rugs, baskets, table runners, bureau scarfs, brushes, mats and many other decorative articles, which are sold at sales and to special customers. The entire profit, after the material has been paid for, is used for the benefit and amusement of all the patients.

Over 40 per cent of our patients are regularly employed in the occupational therapy department and in the various other departments and industries of the hospital, which include the sewing and mending room, taylor shop, the industrial shop where brooms, mattresses and furniture are made and repaired. Also in the kitchen, dining rooms, laundry, farm, garden and the wards.

The new wing for male patients which is under construction contains two large rooms for occupational therapy purposes which will increase our facilities in that department and give more patients the benefit of this most important form of treatment.

#### TRAINING SCHOOL FOR NURSES.

The hospital has continued to offer a three years' course for nurses which is open to men and women. The first two years' training are given in this hospital and the last year our students spend in Bellevue Hospital in New York City and Fordham Hospital with which we are affiliated. While our State requirements for entrance are only two years in high school or its equivalent, nearly all of our pupil nurses are high school graduates which shows that as time goes on we are getting a better class of applicants which means that the nursing in the hospital is more efficient.

During the past year we have had many more applicants for positions as pupil nurses than we had positions for and we were therefore in a position to choose the best. During the two years past twelve nurses graduated, eight of whom have taken and passed the Maine State Board. At the end of the biennial period eight registered nurses and twenty-seven pupil nurses were employed in the hospital service.

The training school has continued under the able direc-

tion of Miss Mary I. Collins, and much of the success has been due to her earnest efforts.

The greatest need of our training school is a Nurses' Home which will furnish homelike living quarters for our nurses. Unfortunately they still have to room in quarters intended for the patients, in unfinished attics and other entirely unsuitable quarters, which deplorable condition it is hoped the next Legislature will remedy by appropriating funds for the construction of a modern home for the nurses.

#### BUSINESS DEPARTMENT.

Mr. William Thompson, the Steward and Treasurer, has continued to purchase the supplies for the hospital and has supervised certain departments. He is an economical buyer and efficient manager of the departments under his supervision. The financial report, audited by the State Auditor's Department, shows in detail the financial affairs for the two fiscal years included in this report.

#### NEW BUILDINGS AND IMPROVEMENTS.

The construction of the New Wing for male patients already referred to elsewhere began a year ago and will be ready for occupancy in January 1929. Wards C-1 and E-1 have been renovated with new floors, transoms installed over the doors and the wards and rooms painted throughout. A new and up-to-date physiotherapy equipment including one high frequency machine, one Morse wave generator, one quartz light for ultra-violet rays and zoalite infra-red light have been installed. New roofs have been built over the bakery and the laundry. A new electrola has been purchased for the congregate dining room. New rubber flooring has been laid in the nurses' and employees' dining rooms. Also new rubber flooring in Ward C-3 and new rubber runners in the main corridors leading from the main entrance to the congregate dining room and corridors leading to C-1 and E-1 wards. The culverts at the approach from State Street have been re-built and a new concrete apron connecting the approach to the main entrance with the State Street has been built.

## DENTAL REPORT.

The dental work of the hospital has continued to be done by Dr. Lichtenstein. Practically every patient was examined approximately every third month. Increasing use was made of the Roentgen Ray in order to facilitate a better diagnosis of the case in question. By decreasing less important or doubtful modalities of treatment, such as root canal treatments and filling more time was gained for prophylactic work which resulted apparently in a decrease of extractions.

Systematic treatment of Vincents infections, has resulted in a gradual but rapid decrease of the disease and I may report now that Vincents infections have almost disappeared.

The following is a partial summary of the work done from July 1, 1926 to June 30, 1928.

	Male	Female	Total
Examinations .....	1578	1343	2921
Extractions .....	1402	874	3276
Gas Administrations .....	42	29	71
X-Ray Examinations .....	297	349	646
Gold Restorations .....	104	71	175
Hand Carved Porcelain Restorations .....	50	44	94
Dentures .....	51	32	83
Repairs .....	21	26	47
Microscopic Examinations .....	100	72	172
Vincents Cases .....	48	25	73
Surgical work, such as removal of cysts, resections, apicoektomies, impactions, etc. ....	56	53	109
Prophylactic Treatments .....	531	544	1075
Fillings .....	216	227	443
Treatments .....	75	39	114

## NEEDS OF THE HOSPITAL.

1. For the construction and equipment of a Nurses' Home (according to size) from \$130,000.00 to \$145,000.00

A suitable home for the nurses with provisions for lecture and instruction rooms for the training school is an urgent need of the hospital. At present our nurses sleep in an unfinished attic over a ward for disturbed and noisy patients,

others sleep in rooms on our wards for women, and all live in close proximity with the patients for whom they are caring. If the Nurses' Home is built their present quarters will accommodate 35 additional women patients which room is much needed for them.

2. Remodeling the Kitchen, \$3,000.00

Additional room is necessary for a dishwashing room in order to remove this work from the center of the kitchen.

3. Renovating and Enlarging the Cold Storage Plant, \$6,000.00

The present cold storage plant is old, inefficient and inadequate. The increased capacity when the New Wing is completed will cause a demand on the old storage plant far beyond its capacity and such a renovation is therefore an absolute necessity.

4. Additional Laundry Equipment, \$8,000.00

Additional laundry equipment is necessary to replace worn out machinery and to increase the equipment to meet the increased demands due to the increase in population.

5. Elevator in Building-D, \$7,000.00

Building D is a five story building with five floors for patients without an elevator. Sick patients must be carried on stretchers from the upper floors to the hospital wards which causes a great deal of lifting for the nurses. It is also difficult for feeble patients to walk up and down the stairways to and from the dining rooms and out for exercise. An elevator in building D is an urgent necessity.

6. New Piggery, \$5,000.00

The present piggery is located too near the wards for proper hospital sanitation and on account of the wooden floors it is also a constant and prolific breeding place for rats.

A new piggery with rat proof foundation and rat proof floors should be built at a proper distance from the wards

in order to eliminate bad odors and the danger and nuisance of rats.

#### COMMITMENT OF PATIENTS.

The commitment of mental patients to the state hospitals should be made as simple as possible. Mental disease is a medical problem, and instead of having mental patients committed as at present by the selectmen of towns and the municipal officers of cities, who are usually laymen, admission to the state hospitals should be made effective on a certificate of two properly qualified physicians. It should be as easy for a mentally ill patient to be admitted to a state hospital for treatment as it is for a physically ill patient to be admitted to a general hospital for treatment.

It should not be necessary to declare a mental patient "insane" before he can be admitted to a state hospital for treatment. Many patients who suffer from mental disease and who require state hospital treatment are not "insane" in the legal sense. While no mental patient should be deprived of his liberty without process of law, it should not be necessary to insist on a legal process, whether the patient wanted it or not. It should not be necessary to insist on an alleged constitutional right at the expense of unnecessary delay in treatment which may cause the patient to lose his life.

Mental patients do not like to be declared "insane", the patients' friends and relatives do not want them declared "insane", and the physicians do not want to declare their patients "insane". To publicly declare a patient "insane" has also a tendency to aggravate his mental condition, retard his chances for improvement and recovery, handicap him after recovery in finding employment or holding positions, and the label of "insanity" thus publicly pinned on a patient has a tendency to injure the good name of other members of the family. The laws should be so modified that mental patients could be committed to, admitted and detained in state hospitals for mental diseases because of mental disease the same way, as in some states, patients who are suffering from tuberculosis are committed to and detained in hospitals for tubercular patients. Under such modification of the

commitment laws, mental patients would still have their legal rights and could take the matter to court through their attorneys, relatives or friends. In the writer's opinion, our present methods of committing mental patients to the state hospitals are obsolete and unjust to the patients, and anybody who is familiar with such proceedings recognizes on the face of it that they are a farce in the majority of cases. Simplify the procedure, let the patients be admitted to state hospitals on physicians' certificates without being labeled "insane", and leave the courts accessible to the patients if they want to appeal and it will be surprising how rarely such appeals will be made.

#### CONCLUSION.

In closing my ninth and tenth annual reports, the twenty-sixth and twenty-seventh reports of the hospital, I wish to express my appreciation to the many friends of the institution who have contributed to the welfare and happiness of the patients.

Mrs. Jessie H. Ingraham and the other members of the visiting committee from the Governor and Council have in the course of their regular and frequent visits, been able to render very valuable service to the hospital. Mrs. Ingraham's regular visits are always looked forward to by the patients with much interest and grateful appreciation.

To the clergy of Bangor and to the consulting staff who have given so freely of their time and whose support and assistance has done much for the spiritual and physical welfare of our patients, I feel greatly indebted. I also wish to express my thanks to friends who have given books, periodicals, tobacco, candy and other edibles.

I desire to express my thanks and appreciation to the members of the medical staff and the other officers and employees of the hospital for their loyal co-operation and devotion to duty so necessary for success.

To the Board of Trustees as a group and as individuals, I wish to express my sincere appreciation for their advice and assistance. Their constant interest in the welfare of the

patients, their fair attitude toward the employees and resident officers, including myself, has always been helpful, encouraging and inspiring.

Respectfully submitted,

CARL J. HEDIN, M.D.,  
*Superintendent.*

July 1, 1928.