

REPORT
OF THE
ASYLUM FOR THE INSANE, LONDON

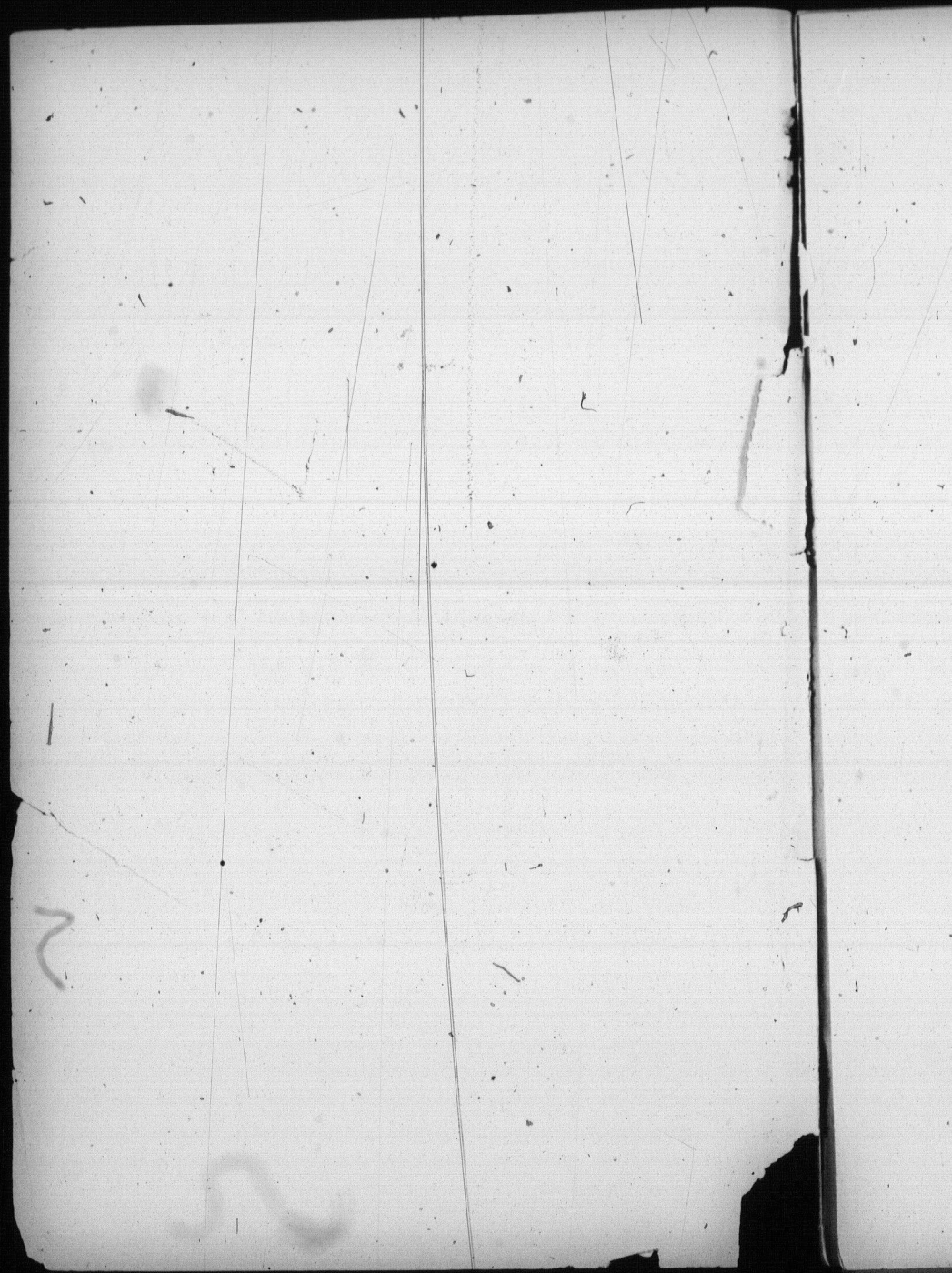
FOR THE
YEAR ENDING SEPT. 30, 1881,

ADDRESSED TO
J. W. LANGMUIR, ESQ.,

INSPECTOR OF ASYLUMS, &C, FOR THE PROVINCE OF ONTARIO,

BY
R. M. BUCKE, M. D.
SUPERINTENDENT.

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1882.



Officers of the Asylum.

J. W. LANGMUIR, *Inspector.*

R. M. BUCKE, M.D., *Medical Superintendent.*

T. J. W. BURGESS, M.B., *Assistant Superintendent.*

N. H. BEEMER, M.D., *1st Assistant Physician.*

T. MILLMAN, M.D., *2nd Assistant Physician.*

T. SHORT, *Bursar.*

R. HARDY, *Steward and Storekeeper.*

MISS POPE, *Matron.*

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INSPECTOR'S REPORT
ON THE
ASYLUM FOR THE INSANE, LONDON.

The operations of this Asylum in respect to the movements of patients have been large and varied during the past year. On the 1st of October, 1880, there remained in residence 784 patients—384 men and 400 women,—and during the past twelve months 102 men and 84 women were admitted, making the total number under treatment 970, as compared with 902 in the preceding year. Of the 186 admissions, 89 were transfers from the Common Goals under the warrant of the Lieutenant-Governor, and 97 were received from private families on medical certificates, the latter class almost entirely from the counties attached to the London Asylum for receiving purposes. A considerable number of the warrant cases, however, were received from the eastern counties attached to Kingston Asylum, where there were no vacancies during a large portion of the year.

The discharges during the year numbered 73; of which number 1 was found not to be insane, 47 were sent home recovered, 13 improved, and 12 unimproved. Thirty-eight patients died during the year; 4 escaped; and 3 were transferred to other Asylums. The ratio of cures to the admissions was 25 per cent., as compared with 26.25 in the previous year, and the death rate was 4 per cent. of the entire population.

A large number of patients continue to be sent out on probation from this Asylum. During the past year 74 patients were thus placed in the care of their relatives and friends, of whom 26 were subsequently discharged recovered, 10 improved, 4 unimproved; 19 were sent back to the Asylum

on the return of unmanageable habits; and 15 were still out on probation at the close of the official year.

The average daily population of the Asylum was 402.12 men and 413.96 women, or 816.08 of both combined. The largest number of patients in residence on a given day was 853 on the 29th September, and the least number was 782 on the 13th November, 1880. The collective days' stay of all the patients was 297,871 days, which would make an average stay of 307 days for each patient.

The whole number of patients admitted to this asylum (including transfers from other establishments) since its opening in 1870 is 1,967; of whom 642 were discharged, 386 died, 33 escaped, and 54 were transferred, leaving 852 in care at the close of the last year. Of the 244 patients who were transferred from the Malden to this Asylum on the 18th of November, 1870—11 years ago—67 have died, 17 have been discharged, 3 escaped, and 18 were transferred to the Asylums at Hamilton and Orillia, leaving 139 of the number still under care in this establishment.

MINUTES OF INSPECTION RECORDED DURING THE YEAR.

LONDON ASYLUM, 25th April, 1881.

I have been occupied during the past three days with an official inspection of this Asylum, during which time an examination has been made of every part of the premises, and a careful inquiry into the management of the affairs of the institution.

The number of patients whose names appear on the Asylum register, and the changes in the population since the 1st of October last, are shown in the following summary:

	Males.	Females.	Total.
In residence on 30th September, 1880 ..	378	396	774
Out on probation	6	4	10
Admitted from 1st October, 1880, to date	51	39	90
Total number entered on register ..	435	439	874

	Male.	Female.	Total.
Died.....	13	5	18
Discharged	14	20	34
Eloped	1	1	2
Transferred to other Asylums	1	1	2
Now out on probation	6	10	16
	—	—	—
			35 37 72
Now in residence..			400 402 802

It is thus shewn that the registered population of the Asylum has increased from 784 on the 1st October, to 818 to-day, but deducting the patients out on probation at both periods, the number actually in residence has risen from 774 to 802.

Of those admitted during the period named, 28 males and 7 females were transferred from the Common Gaols, under the Lieutenant-Governor's warrant; and 23 men and 32 women were received from private houses, upon the certificates of three medical practitioners. Only 19 of the 90 admissions are entered as paying patients, for whom maintenance is paid, wholly or partially; the rest are entered as free patients. The 18 deaths all resulted from natural causes, and in some cases the patients were very old, the average age of the 18 being 50 years. Of the 34 discharges, 20 were sent away recovered, 7 improved, and 7 unimproved; but of those reported recovered, 2 cases of recurrent insanity were subsequently returned to the Asylum, as was also 1 of those who had been sent home improved.

Although the roll was not formally checked at this visit, I saw all the patients during my stay. Nine were in bed in the male ward and 14 in the female; but some of the patients were only resting. Two of the number were at the point of death, and others were far gone in pulmonary disease. Only a very small portion of the community were under treatment for physical ailments, and as a general thing their bodily appearance was very satisfactory.

The cases of restraint throughout the entire Asylum were as follows:—On the male side, 1 man in muffs, 2 in leather mitts to prevent laceration, and 1 confined to the crib-bed; on the female side, 2 women had on leather mitts, and 1 was tied to a bench. None were secluded in single rooms during the days of my visit. Nine men and 15 women were clothed in strong canvass suits, owing in some cases to destructiveness, and in others to dirty habits, all of the number being occupants of the Refractory Wards. Restraint of all kinds, since the 14th October, was confined to 11 men and 29 women, or only 40 individuals out of an Asylum population numbering 874 patients; in a few instances, however, the restraint was very frequent. There were a few scratched and discolored faces, but, as far as I could learn, they were shewn to be the acts of other patients, or of the patients themselves upon whom the marks were found. A slight improvement was noticeable in the clothing of the male patients, and now that there is a new tailor, it is to be hoped the improvement will continue. The largest number, however, of the men in the main building and cottages, and nearly all the women, were neatly and comfortably clad.

I was present at a good many of the meals served to the patients. The food was sufficient, and at the dinners there was considerable variety on the tables. The staple supplies of beef and bread were good, the quality of the former having been much improved since the abandonment of the contract system; and it is expected that the quality will be still further improved when butchering is commenced on the Asylum premises. The butter delivered by the present contractor is good and sweet, but the potatoes on the table were not as good as such an important article of dietary should be. It is desirable that the suppers should be somewhat improved, and the best way of doing this is by increasing the yield of small fruits on the Asylum grounds, so that a large quantity of apple sauce and dried fruits may be made, and more fre-

quently served at supper-time. The cutlery on the table of the associated dining-room for females was not clean, to which the attention of the Medical Superintendent is called; and in order that everything connected with the tables and meals might be under close supervision, he will see that, before every meal, the tables are visited and inspected by a Medical officer, who should also remain during the meals.

The distribution of the patients in the various Asylum buildings was as follows:—in the *Cottages*, 90 men and 90 women, which number exhausts all the beds in those houses; in the *Refractory Wards* the beds were also full, viz.: 62 men and 62 women; and in the *Main Asylum* there were 248 men and 250 women. As the entire Asylum, exclusive of the two unfurnished wards in the basement of the Refractory Asylum, provided beds for 423 of each sex, there were, therefore, only 23 vacant beds for men and 21 for women, shewing the necessity for proceeding with the furnishing of the two remaining wards, which will add thirty-one additional beds for each sex to the existing Asylum accommodation.

The Main Asylum and the Cottages were in excellent order. The halls of two of the cottages have been greatly improved by painting the walls, and it would be well to continue the same work in the remaining houses. These cottages, at all times models of comfort and neatness, are now as cheerful and bright-looking as it is possible to make them. The use of so many stoves and fire-places in winter—viz., 13 stoves and 14 grates—is not only an expensive, but a very inefficient, method of heating the cottages, which it is desirable to remedy. To this end the Medical Superintendent is authorized to have the Engineer and his staff (without any outside labour) place pipes and appliances in the north cottage, with a view to heating it with hot water; but in placing the pipes, the Engineer will keep in mind that at some future day the Asylum and all its branches may be heated by steam generated at a central boiler-house. Since my previous visit to the

LONDON ASYLUM REPORT.

Refractory Wards, some internal improvements have been effected; the painting of some of the walls (which work is still in progress) has brightened them up a good deal and given them a tidier look. Considering the class of patients in occupation of these wards, they were found in fair order, but they have not yet reached the proper standard in this respect. The ventilation of the rooms during the day did not seem to be well looked after, as many of the windows were closed, and the air was bad. The reconstruction of the steam-heating arrangements in the east wing of this building is, after the winter's trial, reported by the Medical Superintendent to be entirely satisfactory, at least 100 tons of coal having been saved by the change. Such being the case, the Medical Superintendent is authorized to have the west wing reconstructed in the same manner, provided the work can be all done by the Engineer and his staff, and at an outlay of a sum not exceeding \$250 for material. The window-guards are still giving a great deal of trouble, being constantly tampered with by destructive patients. These defects will again be brought to the notice of the Architect of the Public Works Department.

The probable occupation of all the Asylum beds within the present year renders it necessary to proceed with fitting-up and furnishing the two lower wards of the Refractory Asylum. To enable this to be done, there must first be provided a kitchen and scullery, as the dining-rooms of the unoccupied wards are now used for these purposes. As there is no vacant space in the building, a structure will have to be erected in the rear in order to get the requisite room. The Medical Superintendent is therefore authorized to proceed with the erection of a building, as per sketch and description herewith, and the Bursar is authorized to purchase the brick, lime, and other material required to complete the structure, and to render the accounts for payment out of capital appropriation. In order that this and other very necessary works may be ready for occupation not later than 15th August, the

Medical Superintendent is authorized to engage an extra carpenter and mason for two months, whose wages shall be paid out of the same vote. Simultaneously with the progress of this building, the Bursar is also authorized to have manufactured the articles of furniture and furnishings named in the schedule attached, the prices not to exceed those named in the estimate, and the articles to be as nearly as possible of the same style and make as those in use in the other wards; the aggregate cost of the furniture not to exceed \$1,500.

In connection with the operations of the Refractory Branch, the Medical Superintendent will see that a Supplementary Register is opened and properly kept by the Resident Medical Officer, giving the following information, under the respective headings: (1) Name of patient sent to wards; (2) when received; (3) when returned, removed, died, etc.; (4) period of stay in Refractory Wards; and a column for such remarks as may be thought desirable in each particular case.

It is desirable that the Farmer should reside on the Asylum premises, in close proximity to the farm-yard; and, the Treasurer having authorized the erection of a house for that officer, a site has been selected. The Bursar is authorized to accept the lowest offer for the lumber required. The carpenter-work and plastering are to be done by Asylum mechanics, and the whole outlay for the house is not to exceed \$800.

The reconstruction of the cow-stables, so as to provide room for twice the number of cattle, has been completed in a satisfactory way, at a cost of \$721.

For the present, the small slaughter-house used for the ordinary requirements of the Asylum will have to be used; but the building is not only too small, but it is to be feared that both the piggery and the slaughter-house (which must be close to each other) are in too close proximity to the cottages.

I am of opinion that both will have to be removed to the north end of the west farm. Until this is done, the Medical Superintendent will see that the best temporary arrangements are made for the cleanliness of these places.

In order that the re-painting of the Asylum may be gone on with during the summer, the Bursar is authorized to purchase 1,000 lbs. of white lead, and the necessary quantity of oil and turpentine, which, along with the stock of paints now on hand, will be sufficient for the work of the summer.

The ordinary hair pillows now in use throughout the Asylum are too hard for the old and the sickly and feeble, and 100 good feather pillows will at once be ordered. One hundred pictures will be ordered, to be placed on the walls where most required, for the purposes of decoration.

In connection with the farm and grounds, the following expenditures are authorized, viz:—1 land roller, \$38; tiles for drainage, \$100; close board fence, to cover up stable buildings and yard from Refractory grounds, \$100; wire fencing, 1,140 feet (for the north field), as per order, \$109; 500 feet of 2-inch pipe for barn-yard and butcher-shop. There are also required for the new orchard 350 fruit trees, and some more shade trees, which will form a charge upon next year's capital appropriation. The following articles of furniture are authorized to be ordered for the Main Asylum cottages, etc.:—20 perforated settees of the same style and cost as previously obtained, 30 arm-chairs, repairs to two bagatelle tables, a hand-wagon for cottages, and a foot-power mortising machine. The Medical Superintendent is authorized to expend \$30 in psychological works, to be kept in his office, for the use and reference of the Medical Staff of the Asylum; also to renew the furniture in the Medical Superintendent's house, to the extent of \$130, as per list.

The requisition for maintenance supplies for the quarter ending 30th June has been carefully examined, the Matron

and other officers have been questioned as to the requirements of the Asylum, and the stores on hand have been inspected. Authority is given to the Bursar to purchase the articles named in the requisition, as amended in respect to quantities, at the lowest net cash quotations.

The pay-list of the institution was examined at this inspection, and the Medical Superintendent and Bursar were instructed as to changes and advances authorized under the Bill of Supply.

Being at the Asylum on a Sunday during my inspection, I attended divine service in the hall, and was gratified at the interest exhibited by the patients, and the excellent order and decorum that prevailed during the service. The services in the past have been entirely conducted by the clergymen of the English Church. I would suggest to the Medical Superintendent that the city clergymen belonging to the other Protestant denominations, as well as the Roman Catholic clergy, be invited to officiate.

The male and female attendants have, at this inspection, been seen for the first time in uniform. The improvement in their appearance is very marked. The Medical Superintendent reports that all the officers, attendants, and servants are performing their duties to his satisfaction, which I will have pleasure in reporting to Government.

— The Asylum was inspected for the *second* time on the 1st and 2nd July, when the following Minutes were recorded :—

ASYLUM FOR THE INSANE,

LONDON, 2nd July, 1881.

During the past two days I have made an inspection of this Institution, in the course of which every part of it has been visited and the premises generally inspected.

Since my last inspection, on the 25th April, there have

been admitted to the Asylum 21 men and 21 women; 4 men and 11 women have been discharged; and 5 men and 4 women have died, leaving on the Register, to-day, the names of 418 males and 418 females. Of this number, however, 9 men and 12 women are home on probational leave, and 1 man has run away, making the actual resident population of the Asylum 814, as against 802 at the previous visit.

The only unusual occurrence connected with these movements was the suicide of a male patient on the 3rd May last. The finding of the coroner's jury empannelled to investigate the circumstances was, that "death was caused by strangulation, and that the Asylum authorities were exonerated from all blame in the matter." From the inquiries I have made, I see no reason for disagreeing with the finding of the jury. The evidence of the officers shows that no suicidal tendency was evinced by the patient, but that, on the contrary, he was of so cheerful a temperament that the ordinary precaution of keeping a watch over him to guard against such an occurrence was not thought of. The strangulation was effected by attaching a sheet to the ventilator in the wall of his bedroom; but even if these openings were closed, experience has shown that other means of committing suicide can be devised by patients who have a strong suicidal tendency.

I have a very good report to make of the condition of the patients. Their personal appearance, in respect of clothing, shews considerable improvement, except in the Refractory Ward, where a greater number were clothed in canvass dresses than appeared to be necessary. In the Main Building and Cottages the only cases of restraint were one man in a cribbed and one female strapped, and there was very little excitement among the patients.

The mortality of the Asylum since my last visit has been unusually low, there having been only 9 deaths, and the health of the patients at the present time is generally good.

The dining-rooms were visited several times during my visit, and, with the exception of the lack of milk for porridge, the food was good and sufficient.

The night previous to my visit an irregularity of a very serious nature occurred in the Asylum. One of the attendants, who had been engaged as night-watch only for a short time, entered the upper Refractory Female Ward during the absence from that corridor of the female watch, and made his way to the room of one of the female patients, where he was subsequently discovered by the female watch, and it is presumed, from all the evidence that can be obtained, that he had improper connection with the lunatic. That a man so brutish in nature could be found to perpetrate this act was hardly to be expected in the Asylum service; but that such an act has taken place appears to show that there is a necessity for making a change in the system of night-watching but as the proposed change involves additional expenditure the sanction of the Government will have to be obtained. In the meantime I would call attention to the fact that allowing one of the night-guards of each sex to be off duty on Saturday nights and holidays is not permitted in any other Asylum, and the Superintendent will see that it is stopped here. He will also, pending the change that is proposed, see that respectable men and women, (married, if possible) are engaged for night-watch duty. He will also arrange that visits shall be made by the Medical Staff of the Asylum at irregular periods at night, so that it may be ascertained whether the night-watchers are performing their duties properly, and are constantly on the alert. The Medical Superintendent is to be commended for the prompt manner in which he took out warrants for the apprehension of the criminal, but it is to be regretted that he succeeded in making his escape from the constable who had him in custody.

Another unfortunate circumstance occurred in the Asylum, through which it appears a patient's arm was broken by one

of the male attendants. The Superintendent was instructed to lay information against the attendant, which resulted in his being fined by the magistrate before whom the complaint was laid. The attendant was of course dismissed.

The Main Asylum and Cottages were found in their usual excellent condition of cleanliness and good order. In the Refractory Wards, however, owing partly to the character of the patients, and partly to structural defects and other causes, neither good order nor neatness generally prevailed, and in some parts of the building want of cleanliness was observable. Undoubtedly the proper care of refractory and dirty patients is attended with much that is unpleasant, as well as with constant anxiety; but as the officers and attendants upon the staff have presumably been selected owing to their special fitness for the work, I am of opinion that both the building and the patients should be in a better state than are found on this occasion. The Medical Superintendent has taken such action as it is hoped will result in bringing up the Refractory Branch to the excellent condition in which the other portions of the Asylum are found.

The darkness of the Refractory Wards is really a most serious defect, and it will be recommended to the Public Works Department that a cupola or dome be placed in the upper ward, at a point near the entrance, the circumference of which shall include the whole breadth of the hall. In this way not only will the entrance of that corridor be better lighted, but an improved means of ventilation will be provided.

The structures, alterations and furnishings ordered in my last Minute are in progress, but the Medical Superintendent will see that the basement wards in the Refractory Asylum are ready without fail on the 15th August, in order that accommodation may be provided for 20 patients that are to be transferred from the Kingston Asylum.

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yard fence of the Refractory Asylum will be brought under the notice of the Architect of the Public Works Department.

The re-distribution of the rooms in the Main-Building, according to the recommendation of the Medical Superintendent, is approved of, and authority is given to the Bursar to buy what is required to furnish the rooms for the third Assistant Physician, as per list hereto attached.

The quarterly requisitions have been carefully examined, and the Bursar will proceed to make the purchases at the lowest wholesale rates.

At this visit I inquired into the milk supply of the Asylum, and found that it was much smaller than the number of cows appeared to warrant. There are forty-three cows, from which number only 293 quarts are received. This short supply of milk is no doubt due to preventable causes; if not to an inferior breed of cows, it must be owing to improper care and milking, or want of attention to requisite changes and rotation. To whatever cause it is due, it is most important that the short supply should at once be increased, as the porridge in the morning, for which thirty quarts would suffice, has now to be taken with molasses or sugar instead of milk. The Medical Superintendent will be good enough to give the whole question his most careful consideration, with a view to bringing up the quantity of milk to 400 quarts without increasing the number of cows. It will be recommended that an appropriation be voted to enable the Asylum to obtain, by exchange or purchase, a stock of really good milch cows, and also that a small sum be allowed each year for the purpose of keeping up the quality of the stock by exchange, instead of retaining inferior cows without reference to the quantity of milk they give.

The *third* inspection of the Asylum took place in August, when the following Minute was made:—

LONDON ASYLUM, August 30th, 1881.

This Asylum was examined yesterday and to-day, being the third inspection during the current official year. The movements of patients since the 2nd of July have been as follows:—Registered on that date, 418 males and 418 females; admitted since, 18 males and 20 females, making a total of 874; during the same period there were discharged 9 males and 7 females; died, 4 males and 1 female; eloped, 1 female, leaving on the Register to-day, 423 males and 429 females, of whom there were out on probation 4 males and 11 females, and 2 males who had escaped, leaving in actual residence 417 males and 418 females, or a total of 835.

During my two days' stay I saw every one of the 835 patients, and took full notes of their condition and appearance and of the special facts and circumstances connected with their respective cases. The roll was also checked, showing where the patients had been received from, the date of their admission, and the prospects of treatment.

The distribution of patients throughout the Asylum is as follows:—In the wards of Main Asylum, 521; in the three cottages, 180; and in the Refractory Asylum, 134. The condition of the patients in the Main Asylum was generally satisfactory, particularly in the female wards; and at the Cottages the patients lodged there could not be more comfortable. There was a slight improvement in the appearance of the patients in the Refractory Wards, and fewer were in canvass.

The health of the patients has been good during the past two months and the rate of mortality very low, although an unusually large number of patients—viz., 16 men and 18 women were found in bed during the day; of these numbers, 6 on the female side and 8 on the male are almost constantly confined to bed, but the remaining 20 were only suffering or had retired to bed temporarily. There was a very little excitement of a boisterous kind in the wards of the Main Asylum.

although some noise was noticeable in two of the female wards, but there was an absolute freedom from it in the Cottages.

In the Refractory Wards, however, as must be expected, there was a great deal of roughness, and much noise and general excitement, notwithstanding which there was only one case of mechanical restraint, namely, a woman strapped to a fixed chair. In the other portions of the Asylum there was not a single case of mechanical restraint or seclusion on the days of my visit, and in many of the wards such a thing never takes place now.

A very distressing case of maniacal manslaughter took place in the Refractory Ward on the day prior to my visit. A male patient, without provocation or warning, attacked another patient by knocking him down and then jumping on him, causing such injuries as to result in death the day following the occurrence. A coroner's jury enquired into all the circumstances, and found that the death was caused by the injuries received, but that no blame was attached to the attendants in charge. Some facts were elicited during the investigation, which I attended, that seem to necessitate a better system of supervision and reporting by the attendants of the violent proclivities of patients. The Medical Superintendent will therefore give instructions as follows:

1st. Chief attendants to record in the daily report books every case of violence resulting in flesh wounds or discoloration upon patients.

2nd. Such reports are to be carefully examined and enquired into by the Medical Officer in charge of the wards every morning, and if of sufficient importance, this officer will report the same to the Medical Superintendent.

3rd. Three attendants shall be constantly on duty in each of the Refractory Wards, certainly in the two wards on each side of the house in which the worst class of patients are

confined. In order that the latter instructions may be carried out, the Superintendent is authorized to engage a supernumerary, or relieving attendant, for the Refractory Asylum male wards.

I was present when the various meals were served, and found the food to be very good, and no complaints were made of insufficiency. The milk supply I still regard as insufficient, but steps are being taken to increase it. Meantime the Superintendent will give instructions to entirely stop the making of butter, and the Bursar will see that the officers' table is supplied with the best quality of dairy butter, as the contract provides for.

The Asylum, in all its departments, wards, corridors, &c., continues to be kept in most excellent order; also the Cottages; and there is considerable improvement in the appearance of the Refractory Wards.

The Farmer's house, referred to in previous Minutes, is now completed and occupied. The kitchen to the Refractory Wards is also finished and occupied, and the wards are all ready for occupation, with the exception of placing bars and shutters upon the windows, which work the Superintendent is authorized to have done at once.

There are still a good many wards without any wall decorations, and 150 more pictures will at once be ordered, which the Medical Superintendent will distribute to the best advantage, along with those already on hand. /

Owing to the large amount of other carpenter-work that has been going on, the re-laying of the floors has been almost entirely suspended during the past two years. In the estimates of the coming year an appropriation will be asked for hard wood and materials, in order that the work may be resumed. An appropriation will also be asked for perforated settees and seats in the best wards.

The condition of the water-closets in the Asylum is very satisfactory. With hardly an exception they are quite free from bad odour. The chief exception is in the female ward just opened, in which it is quite evident there must be some serious defect, which requires immediate attention. There are two water-closets in corridor I. C. and I. D., of flat I., and only one in the corresponding ward on the male side, which is reported to answer all purposes. I would suggest that the closet I. C. be closed, and that the room be used for mops, brooms, and cleaning arrangements, which are now kept in the bath-room and store-room, causing a bad smell and a good deal of confusion.

It was noticed that the straw used for the new beds in the Refractory Ward is quite musty; the bad smells of an Asylum are quite enough without adding this one to them. The Superintendent will see that the matter is remedied. It is very desirable that the painting of the Refractory Wards shall be gone on with, as the lower wards particularly have a very dingy look.

The condition of the lobby in the main building, at the base of the lifts, is very bad, and the bad air permeates all the adjoining rooms. The close, vitiated air is much aggravated by the odour from the food going up the lifts, causing a bad, sour smell, which extends to the officers' dining-room. The greatest cleanliness will have to be enforced, and the floors and wood-work should be all well painted, in order to diminish the bad smells, and a means of ventilation into a flue, or by some other effective way, will have to be devised. The Medical Superintendent will be good enough to give the matter his attention.

The Superintendent reports that the Public Works Department has left out of the specifications the work of constructing a brick drain from the filterer through the Asylum garden. This oversight will be brought to the notice of the

Commissioner, in order that the contractor may receive instructions as to the work, and when done the Medical Superintendent will be good enough to see that all the levelling is done, so that the entire garden may be cropped next year.

The question of providing auxiliary pumping arrangements and water-supply for this Asylum again forces itself for settlement, in the fact that repairs to the pump, which cannot be made in less than a month, are urgently required. Meanwhile the possibility of a break-down must be provided for under any circumstances, as the interruption of an abundant supply of water, even for a single day, with a population of 1,000 souls, would be nothing short of a disaster. The necessity of immediate action will therefore again be pressed upon the Commissioner of Public Works.

The Medical Superintendent has recommended that he shall be allowed to open doors at the ends of the two lower corridors, so as to enable the occupants of those wards to pass out to the front grounds. Without expressing an opinion as to the extent to which "open or unlocked wards" may be safely worked in our present Asylum organization, I must record my entire sympathy with the most progressive ideas respecting the freedom of insane patients, and with the desire to reduce to the very lowest extent not only mechanical and chemical restraint, but also structural restraint. There is little doubt that the association of all classes of patients in the airing courts has an injurious effect upon the very quiet and convalescing class. Under these circumstances, and taking it for granted that the Medical Superintendent will make a personal selection of the patients to be placed in the wards whose doors it is proposed to open, he is authorized to make the openings.

Certain matters connected with the Bursar's department were inquired into and settled.

LONDON ASYLUM.

REPORT OF THE MEDICAL SUPERINTENDENT FOR
THE YEAR ENDING 30TH SEPTEMBER, 1881.

LONDON, October 1st, 1881.

J. W. LANGMUIR, Esq.,
*Inspector of Prisons and Public
Charities, Ontario.*

SIR,—I have the honour to transmit to you the Eleventh Annual Report of this Asylum.

On the 1st of October, 1880, there were resident at this Asylum 784 patients, of whom 384 were men and 400 women. During the year from October 1st, 1880, to September 30th, 1881, both days inclusive, there have been received at this Asylum 186 patients, of whom 102 were men, and 84 women, making the total number under treatment during the year just closed 970—486 men and 484 women. Of these patients 73 have been discharged during the year (31 men and 42 women), 38 have died (25 men and 13 women), 4 have eloped (2 men and 2 women), 3 have been transferred to other Asylums (1 man and 2 women), leaving in residence at the present date 852 patients (427 men and 425 women). Of the 73 patients discharged, 1, a man, was discharged not insane; 47 (24 men and 23 women) were discharged recovered; 13 (2 men and 11 women) were discharged improved; and 12 (4 men and 8 women) were discharged at the desire of their friends, unimproved. The number of patients discharged, recovered and improved, was 60 (26 men and 34 women), or 32.225 per cent. of the admissions.

The total number of patients under treatment during the

year was 970, and the number of deaths 38, so that the death rate for the year was 3.92 (as against 4.76 for the year ending September 30th, 1880, 4.91 for the year ending September 30th 1879, and 5.1 for the year ending September 30th, 1878). The deaths were all due to natural and unavoidable causes, except two, which will be more especially mentioned further on in this Report—a case of suicide and one of maniacal homicide.

REPAIRS AND IMPROVEMENTS MADE.

I said in my last report that the work done under this head during that year was greater in amount than was ever done in any twelve months before; during the same period just closed it has been still greater.

(1) We have built a good frame house, containing eight rooms, for the farmer, in a convenient situation, just back of the farm buildings.

(2) We have built a large and commodious kitchen and scullery for the use of the Refractory Asylum, and fitted them up with steam kettles, sinks, and everything requisite. Before this was built we used one of the basement dining-rooms for a kitchen and the other for a scullery, but as the basement was to be occupied by patients, these rooms could no longer be used for such purposes.

(3) Having found that a large saving of coal was effected by the change made last summer in the arrangement of the steam heating pipes of the east wing of the Refractory Asylum, and that that wing was also better heated than before the change was made, we this year made the same change in the arrangement of the steam pipes of the west wing of that building.

(4) We have put furnaces and pipes in the north cottage for the purpose of heating that building with hot water, expecting this change to be a source of economy, and also of comfort

to the occupants of that building. Should the result justify our expectation, I shall ask next year to be allowed to supply the other two cottages and the Superintendent's house with the same heating apparatus.

(5) We moved a small frame building that had formerly been used as a pump house in the rear of the east wing of the main Asylum, but which was no longer required for that purpose, to a convenient situation between the store and butcher's shop, built an addition to it, thoroughly repaired it, and fitted it up as a paint shop.

(6) We moved an old ice house, no longer required as such, to a position immediately adjacent to the pig-yard, thoroughly repaired and strengthened it, fitted it up as a slaughter-house, and built a fasting-house beside it.

(7) The office of the Assistant Physicians in the main Asylum until this year contained the medicines for the use of the institution; but, finding that one room was no longer large enough for the two purposes, a small room immediately adjacent was connected with the said office by an open arch, and fitted up with shelving, hot and cold water, gas, a counter, and with cupboards, etc., and converted into a surgery, thus very materially improving both in appearance and convenience this part of the institution.

(8) We have fitted up two new bath-rooms and two wash-rooms in the basement of the Refractory.

(9) We have carried water from the Refractory Asylum to the new farmer's house by the means of a pipe laid below the frost line—a distance of 450 feet.

(10) We have, within the last few weeks, over-hauled the steam force-pump, hose, chemical fire engines, and all the appliances connected with fire protection; have seen that they are in good order and ready for use at a moment's notice.

(11) We carried a new sewer across the cottage grounds, and under the north cottage, for the purpose of draining the basement of this cottage, as the sewer originally put in was so torturous that it could not be kept free, and the basement was being flooded every little while.

(12) It is impossible to specify the painting that has been done at the Asylum this year. Four of the six halls at the Refractory have been painted; the other two must be done at once. A large amount of painting has been done at each of the three cottages, and many offices, rooms, passages, etc., have been painted at the main Asylum. I have done my best to forward this branch of the Asylum service, but in spite of all I could do, it is still far behind where it ought to be.

(13) The patient's library has been still further added to, by books sent by you from the Educational Department at Toronto, and a Psychological library for the use of the medical staff has been founded, partly by books from the above source, and partly by new books purchased for it.

(14) We have continued our war upon the rats to such good purpose, that it is now a rare thing to see or even hear of one of these creatures anywhere about the institution, inside or out.

(15) Many years ago, a steam mangle was bought for this institution, used for a time, and then for some reason, condemned and laid aside. As a mangle was very much needed, I had this one cleaned up, put in order, set up, and connected with steam boilers and shafting. It works well, and I believe does as good work as any mangle in the world would do.

(16) We entirely reconstructed the interior of our large brick cow stable; put in a new floor throughout, drained the whole basement, put in two rows of stalls instead of one, and lowered the ceiling about four feet, so that the stable should be warmer, and there should be more room for hay overhead.

(17) We put a new bread-trough in the bakery, in place of the old one, worn out.

(18) We have trapped all the sinks at the three cottages.

(19) We have put 300 feet of steam pipe over the new laundry to heat the space between the ceiling and roof, and prevent condensation on the former.

(20) We have carried a water-pipe furnished with a faucet to each of the four airing courts, and provided them with cups fastened by chains, so that the patients can help themselves to water as they please. Under each faucet we have made a sink, covered with iron grating, and from these drains run to the nearest sewer. This improvement has been a source of great comfort to the patients, and I have many times wondered how we got on as well as we did so long without it, and that myself or some one else did not think of doing it sooner.

(21) We have built some new, and moved some old fence, and have done a good deal of ditching on the farm.

(22) The attendants, both male and female, have been put in uniform, which has been made at the institution. This change is a very great improvement.

(23) During the year we have begun to kill our own meat, instead of, as formerly, having it delivered by a contractor. The change is a good one. Our meat costs, I believe, a little more, but this is more than made up for in the improvement of its quality.

(24) The appearance of the front halls in the men's wing of the main Asylum has been greatly improved by their having been supplied with perforated settees.

REPAIRS, ETC., RECOMMENDED.

This Asylum is becoming in extent and completeness one of the finest institutions of the kind on the continent. It is,

however, still deficient in many respects, and it is my most earnest desire that such defects and deficiencies as it has, should be as soon as possible removed. That they may be so, I append a list of those which seem to me to most need attention.

(1) The windows of the main Asylum should be overhauled and repaired upon some system that would make escape through them more difficult than it is at present; and that would at the same time make them more efficient as ventilators than they now are.

(2) I desire again to recommend that the Asylum be provided with an auxiliary well and pump, as we are at present in danger of being left without water at any time, without a moment's notice.

(3) For several reasons we ought to have a separate building for religious purposes.

(4) A coal shed is required at the west cottage, similar to the sheds provided for the north and east cottages.

(5) We want a second wagonette.

(6) We want tea and coffee urns for the women's dining-room in the main Asylum, similar to those bought some years ago for the men's dining-room.

(7) The flooring of the main Asylum with hardwood ought to be gone on with.

(8) We want a hay shed built between the two barns.

(9) We require a new steam boiler in place of one which has been used for eleven years, and which is no longer safe. Another boiler requires overhauling and thorough repairing.

(10) The roof of the wings of the main Asylum leaks. The slate should be taken off and re-laid upon felting, as was done a few years ago in the case of the centre building.

(11) The floor of the bakery is giving way, in consequence of the decay of the beams under it. The stone floor should be laid upon brick piers instead of, as now, upon wooden sills.

(12) The steam from the old laundry and drying-room passes up into the attic, and in cold weather condenses upon the timbers there. Steps should be taken to ventilate this attic, as otherwise the timbers of the roof will rot.

(13) A house should be built for the Bursar.

(14) A porch should be built at the front entrance of the main Asylum.

(15) All the land behind the Asylum, inside the circular drive, must be graded, planted, and made into ornamental grounds. I propose to go on with this work as rapidly as possible.

(16) There is still a good deal of road-making and fencing to do, behind the farm-yard, cottages, and Refractory.

(17) We want a coal shed at the Refractory Asylum; none has been built there yet.

(18) The wall around the airing court for men at the Refractory Asylum is not high enough. Several of the more active patients are able to reach the top of it with their hands by jumping up, and then swing themselves over. It requires to be raised about three feet.

(19) The four sewing machines in the sewing-room ought to be run by steam power. If this change were made, far more work could be done by the same number of hands, and their work would not be so trying to them as it is at present.

PREVENTION OF INSANITY.

Twenty years ago, on the 31st of December, 1861, there were in residence in the Asylums of the Province of Ontario 726 persons of unsound mind—lunatics, imbeciles, and idiots,

Ten years ago, on the 30th of September, 1871, there were in residence in the Asylums of this Province 1,366 lunatics, idiots, and imbeciles.

To-day there are in residence in the Asylums of this Province 2,652 persons of unsound mind—idiots, imbeciles, and lunatics.

It would seem from these figures that the number of persons of unsound mind who require the protection and support of the State in this province, very nearly doubles every ten years. And not only in Ontario, but also in the other Provinces of Canada, in every state of the Union, and, as far as I know, in every country of the civilized world, is the same thing true in a greater or less degree. Year by year the number of lunatics, imbeciles, and idiots requiring to be supported and cared for by the State, is rapidly increasing. What is to be the end of this state of things? and where is a remedy for it to be found? Are we to build one Asylum after another, indefinitely, and be content to let the earnings of the country support forever this vast and constantly increasing accumulation of disease and misery? or shall we do something, or try to do something, to prevent its occurrence? Comparatively few States and Provinces in North America provide accommodation for all their insane, and avoid, or seem to avoid, by not taking it up, the heavy burden that we carry. But in these sections of the country, the lunatics either remain at home, each one paralyzing, by his or her presence, the energies of an entire family, or else they are sent to the County Poor-houses, and in either case the cost of their maintenance to the country at large is as great, or greater, than with us, where sufficient Asylum accommodation is provided for them all. No State can really avoid this burden by simply refusing to see it; all have to bear it, each in its own way. The hope that anything material will ever be done towards decreasing the aggregate amount of lunacy by the cure of those afflicted with this disease, if it still exists in any minds, should no

longer be encouraged. Insanity is essentially an incurable disease. It is true that an outbreak of mania or melancholia is not by any means always permanent, and does not even necessarily recur; but the permanence or recurrence of the disease, or the non-permanence or non-recurrence of it, depends not nearly so much upon the treatment to which the patient is subjected, as it does upon his or her original constitution. So that in the case of insanity, the "cures" are really nothing more than recoveries, more or less permanent, occurring in cases where the original predisposition to the disease was not sufficiently powerful to subjugate once for all the mind of its victim. It is not true of insanity alone, but it is true of nearly all diseases, that "cure" means spontaneous recovery, more or less aided by management, but seldom, if ever, actually brought about by medical interference. To look, therefore, for any material decrease of insanity from the cure of individual cases, is to look for something which will never be found. But an unsuccessful search for one thing often results in the discovery of something else, and the thing found may be far more valuable than that which was sought. So looking for a key to the future, the astrologers found astronomy; so looking for the philosopher's stone, the alchemists found chemistry; and so looking for cures, the medical profession is slowly learning the laws of health and disease, and in the end we shall discover something far better than modes of curing diseases—we shall learn how to prevent it. But in order to learn this, in the case of any particular disease, it is necessary in the first place to arrive at an understanding of the nature of the disease itself, and especially it is necessary to understand its cause or causes. No enlightened man will deny that, if insanity was better understood, a very large percentage of the cases of it, if not all of them, might be prevented. But while this is true, and while it is also true that the civilized world to-day is supporting hundreds of thousands of lunatics at an annual expense of a great many millions of dollars, it is also true that it is making no systematic attempt

to relieve itself of this enormous cost, and, what is still more to be considered, this almost infinite mass of suffering. This is certainly an anomalous condition of things for a generation that claims above all things to have "common sense" and to be "practical." It is also true that we do not utilize, in the way of the prevention of insanity, all the knowledge that we already have. We know, for instance, that insanity is remarkably hereditary; that the children of insane parents, or even the children of those in whose family insanity exists, are very liable to become themselves insane. This knowledge, so far, has produced little practical result. Such persons still marry and bring up families, being restrained neither by their own conscience nor by any interference of the State, which issues marriage licenses impartially to those who may reasonably expect to bring up healthy children, and to those who are morally certain to produce diseased offspring.

The object of marriage is to produce men and women to carry on the work of the world, and not to produce syphilitic, tubercular, and insane persons. We call ourselves civilized and religious, and claim to have common sense, yet our Governments license and our Churches bless unions, the offspring of which are foredoomed to idiocy, imbecility, lingering illness, or premature death. I don't mean to say that the church and State combined could prevent children being born of the class of people of which I speak, neither can they prevent altogether murder, theft or prostitution; but they do not sanction these, and neither should they countenance what is as bad as any of these—that is, the bringing into the world imperfect and diseased children, who must necessarily be, all their life, wretched themselves and a burden to the world at large. Nor do I say that any special laws should be made against such unions as I speak of; all I claim is that the community, through its Government and Churches, should cease to countenance what is notoriously wrong. No marriage license should issue, nor any marriage ceremony be performed, ex-

cept in cases where there was a reasonable prospect of healthy issue proceeding from such marriage, and there is no doubt whatever in my mind that either by special enactment, or by the force of public opinion, the reform here contemplated will at last be effected, and disease of all kinds be, through it, enormously reduced in amount. In the meantime, while we are waiting for direct action by the State, something should be done to enlighten and caution the whole people on this point. For this purpose, the powerful influence of the voice of the clergy of all denominations ought to be invoked; no worthier subject could occupy their talents, and in no way could their energies be more usefully employed than in combating this giant evil. And it lies directly in their path; for in the case of insanity, its primary causes, nearly all consist in violations of the moral law. Still more might be done, and surely at last will some day be done, through the educational institutions of the country. If anything in the world is worth teaching, certainly some knowledge of the nature, causes, and means of avoidance of preventable diseases is so, and there is no doubt that in time the schools will see their way to include some such course in their curriculum. By means of these two agencies, and a third as powerful as either of them—namely, the press—something material in this direction will no doubt at last be done, and it seems to me a matter of wonder that more has not been done already. But, in the meantime, no State in the world is doing its duty (and duty here, as in all other cases, is synonymous with enlightened self-interest) in the case of insanity, in investigating those very matters which it is so essential to have the people taught, *i. e.*, the cause, nature, and method of avoidance of this disease. Speaking broadly, the State holds in its Asylums all the lunatics of the country, and it therefore controls more or less directly all original investigations into the disease. But at present the only persons who have access to the patients have, by their positions, so many and such onerous duties assigned to them, that it is impossible for them to do anything material in this

direction. Every Asylum ought to have on its staff, an able and thoroughly educated man as Pathologist, who would be provided with all necessary appliances, and whose sole duty it would be to study insanity in all its aspects—through its literature, by observation of the insane during life, and especially by microscopic examination and other means after death. The Medical Superintendent would, of course, assist in all these investigations, and the results of them would be embodied in the annual and other reports of the different institutions; the discoveries made and the conclusions arrived at in one Asylum would be checked and compared with those reached in others, both by the interchange of reports and at annual meetings. Through the press, through the schools, and perhaps also to some extent through the pulpit, the results arrived at should, as rapidly as possible, be communicated to the people at large, and I believe it is safe to say that through the means indicated many years would not elapse before each State might be saved, even in money, far more by the prevention of lunacy than the means employed would have cost. And in the end I believe the good produced would be simply incalculable. The interests at stake are enormous; the evil is great, pressing, and every year increasing; at present no means are being taken to meet and combat it. Surely we should do something more than bear it passively. To bear patiently inevitable ills may be heroic, but to bear patiently ills that, by the proper exercise of our intelligence and energy, might be avoided, is the reverse of heroic. We know enough at present to avoid a large part of all the insanity that occurs, and it is undoubtedly in our power to learn how to avoid nearly all of it. The question is, shall we try to learn?—and having learnt, shall we act upon our knowledge, or shall we passively bear this terrible evil for want of manliness to rise up and face it?

WATER SUPPLY.

Mr. Cope, the engineer, has reported to me that it will be necessary to overhaul and repair our steam pump in the course

of the coming year, as it has now been in constant use for nearly five years, and is in places a good deal worn. He says that if not attended to it will probably fail to do its work within a year or two. The repairs needed upon this pump will take about a month to make, and there is at present no means by which the Asylum can be supplied with water during that time. I have several times pointed out that at such an immense institution as this has now become, our water supply machinery should be in duplicate, for being single as it is now, even a slight breakage, such as might at any time occur, would deprive us entirely of water, perhaps for many days. Now, however, that the pump must be repaired, some steps will have to be taken by means of which the Asylum may be supplied with water, independently of the well and pump at present being used. Whatever means are adopted to meet the present exigency should undoubtedly be of a permanent nature, and I would strongly advise that they consist of another well and full set of machinery such as we have now. I have no doubt that at the same depth as our present well (130 ft.) an equally good supply of water could be obtained, wherever it was desired to locate the new well; but to run no risk, it would cost but little to bore down to the rock once, or as often as necessary, so as to actually find the water before digging the well. I believe that the total cost of a new well, fitted with a steam pump complete, would not much exceed three thousand dollars.

ALCOHOL.

During the year just closed no beer, wine, whiskey or brandy has been used in this asylum. Something less than five gallons of alcohol (B. P.) have been given as medicine; not more than a few dozen doses of opium, chloral or other sedatives have been given during the same period, and the amount of restraint required and used has been less than ever before in the history of the Asylum. I am more than ever convinced that the use of alcohol, so far from taking the place of seda-

tives and restraint, does, on the contrary, by producing a condition of increased mobility of the great nerve centres, make a larger use of these necessary. In the long run, the use of opium and chloral (unless the patient is kept constantly under their influence) brings about essentially the same condition as does the use of alcohol, so that these also tend to make mechanical restraint necessary instead of taking its place. All this, I think, is clearly shown and demonstrated in the history of this Asylum during the last few years—for, as we have given up the use of alcohol, we have needed and used less opium and chloral; and as we have discontinued the use of alcohol, opium, and chloral, we have needed and used less seclusion and restraint. I have, during the year just closed, carefully watched the effect of the alcohol given, and the progress of cases where in former years it would have been given, and I am morally certain that the alcohol used during the last year did no good.

RESTRAINT.

An accurate record has been kept of the restraint and seclusion employed at this Asylum during the year just closed. A summary of this record is given in the following table:—

	Male.	Female.	Total.
Number of patients restrained....	25	62	87
Number of times restraint and seclusion were employed	495	958	1453
Total number of hours patients were in seclusion	7 $\frac{1}{4}$	877 $\frac{1}{2}$	884 $\frac{3}{4}$
Total number of hours patients were in restraint-bed	2425 $\frac{1}{4}$	875 $\frac{3}{4}$	3301
Total number of hours patients were in restraint-chair	2305 $\frac{1}{4}$	5895	8200 $\frac{1}{4}$
Total number of hours patients were in muffs	4400 $\frac{1}{4}$	1485 $\frac{1}{4}$	5885 $\frac{1}{2}$
Total number of hours patients were in wristlets	468 $\frac{3}{4}$	175 $\frac{1}{4}$	644

Total number of hours patients were tied in bed	623	.....	623
Total number of hours in restraint and seclusion during the year ..	7277½	8262½	15540½

Less restraint has been used during the year just closed than ever before in the history of this Asylum; and I hope to reduce it still more in the future, if I do not (as I hope I may) succeed in dispensing with it entirely. Eighty-seven patients were subjected to more or less restraint, as against 93 in the previous year. The total amount of restraint used amounted in the aggregate to 15,540½ hours, as against 24,403 hours last year. The total residence of patients at the Asylum was 7,148,904 hours, and the percentage of restraint .217—as against .363 last year. With an average population of 816, our average amount of restraint was 1.773, as against 2.776 last year; so that we had, on the average, 1 person in restraint for every 459 in residence, as against 1 for every 275 last year.

SUNDAY SERVICES.

Since the Asylum was first opened ten years ago, until within the last few months, the ministers of the Church of England belonging to the city have in turn preached here every Sunday. As there are only four churches of this denomination in London, each clergyman attended three months of every year. This they did cheerfully without any pecuniary compensation, and I have no doubt they would have gone on indefinitely, doing the work on the same terms. But this seemed to me to be too much to accept from them, however willing they might be to do it. I have therefore, in the course of this year, asked the ministers of all the other Protestant churches to join with the clergymen of the Church of England in this work. They have, without a single exception, most kindly consented to do so, and at present our pulpit is supplied by all the Protestant clergymen of the city in turn. By this arrangement each one has a service about every seven months; the

burden is equally divided, and does not weigh heavily upon any one; and not only so, but, as many of our patients are Presbyterians, Methodists, Baptists, etc., the new arrangement is, on the whole, fully as pleasing to them as was the old one. In this connection I may say that there are two subjects of regret: first, that we have not a proper chapel, in a situation easy of access, which could be reached by the old and infirm as well as by the comparatively young and active; and second that we cannot have Catholic as well as Protestant services. A large part of our population is Catholic. To remove these two difficulties I have in former reports asked that a chapel be built, in a convenient position in the rear of the main Asylum, and about midway between it and the cottages and the Refractory building, and I still ask that this may be done. We could ourselves build a frame chapel such as we require, say 50x30 feet, and fit it up with seats, heating apparatus, and everything requisite, if we were allowed say two thousand dollars to purchase materials and to employ a couple of extra carpenters for a few weeks. Should we be allowed to build a chapel, it could and would be so constructed as to be used by both Catholics and Protestants.

CASUALTIES.

It is said that misfortunes never come singly. We have had no suicide or homicide at this Asylum since I have had charge of it (now nearly five years) until the present year, when we have had both a suicide and a homicide. A second suicide, or accidental death (I think the latter), occurred in the case of a woman who had eloped from [the Asylum the day before; and a patient had an arm broken by an attendant. The exact facts in the four cases are as follows:—

1. On the night of the 3rd of May, 1881, J. A. committed suicide by hanging himself with a sheet to the ventilator of his room. When found about 11 p.m. he was quite dead. The body was at once cut down, the coroner was notified, and

an inquest held next day. The jury exonerated the Asylum authorities and employees.

2. J. M. (a patient) was struck by James Collins (an attendant), with a heavy walking-cane, on the left arm, fracturing the *ulna* about one-third the length of the bone from the wrist. I prosecuted James Collins for assault. He was found guilty, and fined two dollars and costs. He was, of course, discharged from the Asylum service.

3. A woman named E. H. eloped from the Asylum July 9th, 1881; on the afternoon of the next day her body was found in the River Thames, a short distance below London. An inquest was held on the body, and the jury censured the Asylum authorities for not having made a more extended search for the woman. They also recommended that the Inspector should investigate the case.

4. On the 27th or August, 1881, R. A. (a patient), without previous quarrel or warning, struck W. S. (a patient), knocked him down, and instantly jumped upon his body. W. S. died on the 29th. An inquest was held, and a *post-mortem* examination was made. It was found that the cause of death was *peritonitis*, from a ruptured bowel. The jury exonerated the attendants.

AMUSEMENTS.

During the last twelve months we have been able, chiefly through the kindness of the friends of the Asylum in London, to give the patients the usual weekly entertainments, in addition to the regular weekly dance during the winter season, and cricket, quoits, etc., in the summer.

The special entertainments provided during the year were as follows :

- (1) Entertainment by Asylum Minstrel Troupe.
- (2) Grand Concert by the 7th Fusilier Band, under the leadership

of Bandmaster Hiscott. (3) Variety entertainment by Mr. Archie Bremner and Company. (4) Concert by the Choir of Queen's Avenue Methodist Church. (5) Entertainment by J. Goss, Fred Foster and Company. (6) "Lost in London," by T. Brown and Company. (7) "That Rascal Pat," by the Asylum Dramatic Club. (8) Variety entertainment, by F. Westlake's Combination. (9) Concert by Mrs. F. Coles, Mrs. Gilmour, St. John Hyttenrauch, and others. (10) Entertainment by Mrs. J. Cruickshank, the 7th Fusilier Band, and others. (11) "Uncle Tom's Cabin," by T. Brown and Company. (12) Concert by Mr. C. F. Colwell and others. (13) "The Lakes of Killarney," by the Holman Opera Troupe. (14) "The Siamese Twins," by the Asylum Dramatic Club. (15) "The Sleighing Party," by Cool Burgess and Company. (16) An entertainment by F. G. Westlake and Company. (17) "Irish Assurance and Yankee Modesty," by the Asylum Dramatic Club. (18) A Concert by the Choir of St. Paul's Church. (19) A Concert by the 7th Fusilier Band.

All the above entertainments were excellent, and were highly appreciated by the patients, in whose name I offer hearty thanks to all who assisted in giving them.

OFFICERS AND EMPLOYEES.

I have had some difficulty this year in maintaining the Staff of the Asylum; especially during the summer months. Employment has been easy to get outside, and wages, for good men, fully as high as in the Asylum. Several of my best attendants left, to take places in which they get better pay than they were receiving here. During the four years from October 1st, 1876, to October 1st, 1880, 84 attendants and other employees of the Asylum resigned, while during the official year just closed 36 resigned—that is, nearly twice the average number; and the worst of it is, that the best men have resigned in unusually large proportion, because the reason for resigning has been such as to influence this class. I have still

many old and good attendants, but, as a whole, there is no doubt that the Staff is not as good as it was this time last year; and if the relation which now exists between Asylum salaries and wages outside continues, the Staff must continue to deteriorate. In view of this fact, I would recommend that the Asylum salaries be somewhat raised, and especially that greater inducements than at present be offered for continuous service. There has been no change in the officers of the Institution, and they have all done their work in a satisfactory manner.

I have the honor to be, Sir,

Your obedient servant,

R. M. BUCKE,
Medical Superintendent.

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ANNUAL STATISTICAL REPORT
 OF THE OPERATIONS OF
THE ASYLUM FOR INSANE, LONDON
 FOR THE YEAR ENDING 30TH SEPT., 1881.

TABLE No. 1.

Showing movements of Patients in the Asylum for the Official
 Year, ending September 30th, 1881.

	M.	F.	T.	M.	F.	T.
Remaining October 1st, 1880.....	384	400	784			
Admitted during year:						
By Lieut. Governor's Warrant ..	63	26	89			
" Medical certificate	39	58	97			
Total number under treatment during year				486	484	970
Discharges during year:						
Not insane.....	1		1			
As cured.....	24	23	47			
" improved	2	11	13			
" unimproved	4	8	12			
Total number of discharges during year.....				31	42	73
Died				25	13	38
Eloped				2	2	4
Transferred				1	2	3
Remaining in Asylum, 30th September, 1881				427	425	852
Total number admitted since opening of Asylum				1010	957	1967
Total discharged	322	320	642			
" died	214	172	386			
" eloped	27	6	33			
" transferred	20	34	54			
" remaining 30th September, 1881	427	425	852	1010	957	1967

TABLE No. 2.

Showing the maximum and minimum number of patients resident in the Asylum, the total number of days' stay of patients, and the daily average number of patients in the Asylum, from the 1st of October, 1880, to 30th September, 1881.

	Male.	Female.	Total.			
Maximum number of patients in residence (on the 29th of September, 1881)	428	425	853			
Minimum number of patients in residence (on the 12th of November, 1880)	383	399	782			
Collective days' stay of all patients in residence during year	146,774	151,097	297,871			
Daily average population	402.12	413.96	816.08			
	Admissions of Year.			Total Admissions Since Opening.		
SOCIAL STATE.	Male.	Female	Total	Male.	Female.	Total.
Married	36	44	80	407	559	966
Widowed	3	9	12	13	39	52
Single	63	31	94	586	358	944
Not reported	—	—	—	4	1	5
Total	102	84	186	1010	957	1967
RELIGION.						
Presbyterians	18	12	30	201	202	403
Episcopalians	20	20	40	231	180	411
Methodists	22	24	46	192	216	408
Baptists	9	6	15	69	73	142
Congregationalists	1	—	1	10	6	16
Roman Catholics	20	16	36	176	190	366
Mennonites	—	—	—	3	—	3
Quakers	—	—	—	8	1	9
Infidels	—	—	—	18	8	26
Other denominations ..	5	3	8	40	40	80
Not reported	7	3	10	62	41	103
Total	102	84	186	1010	957	1967
NATIONALITIES.						
English	19	11	30	158	117	275
Irish	16	8	24	181	241	422
Scotch	8	5	13	111	107	218
Canadian	47	52	99	441	410	851
United States	5	5	10	52	26	78
Other countries	3	3	6	23	31	54
Unknown	4	—	4	44	25	69
Total	102	84	186	1010	957	1967

TABLE No. 3.

Showing the Counties from which patients have been admitted
up to 30th September, 1881.

	Admitted during year.			Total Admissions.		
	Male.	Female.	Total.	Male.	Female.	Total.
Algoma	0	1	1	1	1	2
Brant	1	1	2	34	30	64
Bruce	6	2	8	48	34	82
Carleton	0	0	0	4	6	10
Elgin	7	9	16	59	63	122
Essex	5	4	9	44	41	85
Frontenac	0	0	0	5	7	12
Grey	5	1	6	8	10	18
Haldimand	0	0	0	21	23	44
Halton	0	1	1	8	5	13
Hastings	1	1	2	5	8	13
Huron	9	12	21	70	70	140
Kent	3	5	8	49	71	120
Lambton	15	7	22	91	60	151
Lanark	0	0	0	2	2	4
Leeds and Greenville	0	0	0	0	5	5
Lennox and Addington	0	0	0	3	1	4
Lincoln	0	0	0	10	6	16
Middlesex	16	17	33	201	185	386
Norfolk	0	2	2	27	34	61
Northumberland and Durham	0	0	0	14	10	24
Ontario	0	1	1	6	12	18
Oxford	12	6	18	79	63	142
Peel	0	0	0	3	5	8
Perth	5	5	10	58	54	112
Peterborough	0	0	0	1	5	6
Prescott and Russell	1	1	2	2	3	5
Prince Edward	0	1	1	1	1	2
Renfrew	0	0	0	0	0	0
Simcoe	0	1	1	13	18	31
Stormont, Dundas and Glengarry	0	0	0	5	5	10
Victoria	0	1	1	12	14	26
Waterloo	3	0	3	27	19	46
Welland	0	0	0	8	6	14
Wellington	5	2	7	16	12	28
Wentworth	1	0	1	10	14	24
York	7	3	10	42	44	86
Other countries and unknown	0	0	0	23	10	33
Total admissions	102	84	186	1010	957	1967

TABLE No. 4.

Showing the Counties from which Warranted Cases have been admitted up to 30th September, 1881.

	Admitted during Year. 1			Total Admissions.		
	Male.	Female.	Total.	Male.	Female.	Total.
Algona.....	0	0	0	1	0	1
Brant.....	1	1	2	15	8	23
Bruce.....	3	0	3	24	13	37
Carleton.....	0	0	0	0	1	1
Elgin.....	3	2	5	15	5	20
Essex.....	3	1	4	22	10	32
Frontenac.....	0	0	0	0	1	1
Grey.....	5	1	6	7	6	13
Haldimand.....	0	0	0	9	3	12
Halton.....	0	1	1	5	3	8
Hastings.....	1	1	2	2	5	7
Huron.....	6	1	7	31	17	48
Kent.....	2	0	2	23	9	32
Lambton.....	9	3	12	57	17	74
Lanark.....	0	0	0	0	1	1
Leeds and Grenville.....	0	0	0	0	0	0
Lennox and Addington.....	0	0	0	1	0	1
Lincoln.....	0	0	0	8	1	9
Middlesex.....	5	3	8	52	35	87
Norfolk.....	0	2	2	19	11	30
Northumberland and Durham.....	0	0	0	4	2	6
Ontario.....	0	1	1	1	5	6
Oxford.....	9	1	10	32	13	45
Peel.....	0	0	0	2	4	6
Perth.....	3	0	3	26	12	38
Peterborough.....	0	0	0	1	5	6
Prescott and Russell.....	1	1	2	1	1	2
Prince Edward.....	0	1	1	0	1	1
Renfrew.....	0	0	0	0	0	0
Simcoe.....	0	1	1	5	5	10
Stormont, Dundas and Glengarry.....	0	0	0	1	0	1
Victoria.....	0	1	1	9	9	18
Waterloo.....	1	0	1	11	4	15
Welland.....	0	0	0	3	4	7
Wellington.....	4	1	5	9	6	15
Wentworth.....	0	0	0	5	8	13
York.....	7	3	10	24	23	47
Total admissions.....	63	26	89	425	248	673

TABLE No. 5.

Showing the Length of Residence in the Asylum of those discharged during the year.

No.	Initials.	Sex.	When Admitted.	When Discharged.	Remarks.
1880					
1	J. G.	M.	September 14, 1871.	October 12.	Recovered.
2	C. S. W.	M.	September 10, 1878.	October 16.	Improved.
3	J. W.	M.	September 11, 1874.	October 20.	Recovered.
4	S. P.	M.	September 30, 1880.	October 22.	Recovered.
5	A. B.	F.	April 3, 1880.	November 2.	Recovered.
6	J. H.	M.	November 7, 1877.	November 10.	Recovered.
7	G. McI.	M.	January 17, 1877.	November 11.	Recovered.
8	M. G.	F.	June 28, 1880.	November 11.	Recovered.
9	M. P.	F.	August 21, 1880.	November 12.	Improved.
10	A. H. Mc.	M.	June 22, 1880.	November 13.	Recovered.
11	M. A. J.	F.	October 13, 1879.	November 17.	Improved.
12	A. M.	M.	July 27, 1880.	November 30.	Recovered.
13	M. J. C.	F.	August 9, 1880.	December 1.	Recovered.
14	K. S.	M.	March 31, 1881.	December 9.	Improved.
15	M. A. R.	F.	August 20, 1879.	December 10.	Recovered.
16	J. S. A.	M.	April 16, 1879.	December 15.	Recovered.
17	R. L.	F.	November 6, 1879.	December 15.	Improved.
18	M. R.	F.	December 9, 1880.	December 25.	Recovered.
1881					
19	L. H.	F.	July 26, 1880.	January 3.	Recovered.
20	E. A. W.	F.	January 23, 1880.	January 4.	Improved.
21	W. E.	M.	August 20, 1880.	January 6.	Recovered.
22	E. G.	F.	September 4, 1880.	January 6.	Improved.
23	J. Mc.	F.	July 17, 1880.	January 11.	Improved.
24	M. A. Mc.	F.	January 18, 1881.	January 21.	Unimproved.
25	E. L.	F.	November 23, 1881.	January 22.	Recovered.
26	W. W. F.	M.	September 4, 1880.	January 28.	Unimproved.
27	W. W.	M.	January 4, 1881.	February 3.	Recovered.
28	J. W.	F.	September 17, 1879.	February 22.	Unimproved.
29	T. C. L.	M.	September 9, 1880.	March 1.	Recovered.
30	D. D.	F.	December 14, 1880.	March 7.	Recovered.
31	J. M.	F.	October 2, 1880.	March 7.	Unimproved.
32	E. C.	F.	March 23, 1881.	March 28.	Unimproved.
33	A. Mc.	F.	February 19, 1880.	April 1.	Recovered.
34	F. P.	F.	March 31, 1881.	April 23.	Unimproved.
35	A. Mc.	M.	October 8, 1880.	April 28.	Recovered.
36	R. J. J.	M.	February 19, 1881.	May 6.	Not insane.
37	H. B. J.	M.	October 27, 1879.	May 7.	Recovered.
38	P. A.	F.	May 29, 1880.	May 30.	Improved.
39	S. Mc.	F.	February 3, 1881.	June 6.	Improved.
40	M. B.	F.	July 30, 1879.	June 15.	Recovered.
41	M. F.	F.	February 20, 1879.	June 17.	Recovered.
42	M. A. D.	F.	December 8, 1880.	June 17.	Recovered.
43	C. K.	F.	April 23, 1880.	June 18.	Unimproved.
44	A. B.	F.	October 27, 1880.	June 20.	Recovered.

TABLE No. 5.—Continued.

No.	Initials.	Sex.	When Admitted.	When Discharged.	Remarks.
				1881	
45	M. R	F . .	April 1, 1881	June 22	Recovered.
46	M. J. F . . .	F . .	June 17, 1879	June 24	Improved.
47	E. G	F . .	November 19, 1880	June 27	Recovered.
48	M. A. Mc . . .	F . .	May 17, 1880	June 28	Improved.
49	J. M	M . .	July 22, 1880	June 30	Unimproved.
50	W. E	M . .	July 12, 1880	July 4	Recovered.
51	M. A. M . . .	F . .	February 22, 1881	July 6	Recovered.
52	M. E	M . .	November 22, 1880	July 6	Recovered.
53	E. C	M . .	September 30, 1880	July 7	Recovered.
54	M. T	F . .	July 28, 1879	July 8	Unimproved
55	W. C. C . . .	M . .	January 20, 1881	July 12	Recovered.
56	J. H. W . . .	M . .	January 24, 1881	July 14	Recovered.
57	J. P	F . .	March 26, 1881	July 14	Recovered.
58	R. M	M . .	June 15, 1881	July 15	Recovered.
59	E. P	F . .	March 15, 1881	July 28	Recovered.
60	J. M	M . .	June 25, 1881	July 28	Unimproved.
61	E. Mc	F . .	January 4, 1881	July 30	Recovered.
62	B. A	F . .	March 17, 1880	August 3	Recovered.
63	L. S	F . .	November 26, 1880	August 17	Improved.
64	D. O	M . .	July 28, 1880	August 25	Recovered.
65	J. J	M . .	February 1, 1881	August 27	Recovered.
66	A. T	F . .	November 20, 1877	August 30	Recovered.
67	S. H	F . .	June 2, 1881	August 31	Recovered.
68	C. B	M . .	July 28, 1880	August 31	Recovered.
69	J. S	M . .	April 1, 1881	September 2	Recovered.
70	A. R	F . .	June 9, 1881	September 6	Recovered.
71	J. J	M . .	August 19, 1880	September 8	Unimproved.
72	A. T	M . .	July 20, 1881	September 14	Recovered.
73	H. L	F . .	November 20, 1881	September 28	Improved.

TABLE No. 6.

Showing Age, Length of Residence, and Proximate Cause of Death of those who died during the year ending 30th September, 1881.

No.	Initials.	Sex.	Age.	Date of Death.	Residence in Asylum.			Proximate Cause of Death.
					Y.	M.	D.	
1880.								
1	F. A. B.	M.....	47	26th Oct..	0	5	8	Apoplexy
2	M. B.....	F.....	50	5th Nov..	9	11	13	Latent phthisis
3	J. W.....	M.....	67	12th Nov..	7	9	23	Marasmus
4	G. B.....	M.....	40	24th Nov..	0	8	7	Aortic aneurism
5	J. J. M..	M.....	40	25th Nov..	7	10	28	Phthisis
6	J. A.....	F.....	52	26th Nov..	0	2	12	Marasmus
7	C. F.....	M.....	72	31st Dec..	0	3	17	Old age
1881.								
8	T. O. B..	M.....	48	3rd Jan..	10	1	11	Marasmus
9	S. H.....	F.....	37	15th Jan..	1	2	23	Phthisis
10	J. Mc.....	F.....	44	21st Jan..	10	2	3	Latent phthisis
11	D. Mc.....	M.....	24	25th Jan..	2	9	17	Latent phthisis
12	R. H.....	M.....	73	27th Jan..	2	6	24	Paralysis
13	M. G.....	F.....	38	8th Feb..	6	0	2	Pectoral abscess
14	J. Mc.....	M.....	29	8th Feb..	1	3	26	Marasmus
15	R. Mc.....	M.....	75	10th Feb..	0	1	6	Apoplexy
16	A. L.....	M.....	54	29th Mar..	0	1	22	Marasmus
17	J. L.....	M.....	31	3rd April	0	7	7	Latent phthisis
18	T. A.....	M.....	59	10th April	4	6	23	Abscess of brain
19	N. G.....	M.....	77	25th April	6	6	28	Senile gangrene
20	H. P.....	M.....	38	30th Apr..	0	0	23	Heart disease
21	W. J.....	M.....	55	3rd May..	3	4	9	Abscess of brain
22	J. A.....	M.....	26	3rd May..	0	5	14	Asphyxia
23	M. Mc.....	F.....	70	4th May..	2	2	8	Phthisis
24	A. Mc.....	F.....	70	6th May..	1	8	25	Peritonitis
25	F. S. W..	F.....	54	7th May..	1	1	19	Pulmonary apoplexy
26	J. A.....	F.....	74	16th May..	1	9	7	Old age
27	S. H.....	M.....	56	30th May..	2	9	17	Heart disease
28	A. J. Mc.	M.....	36	10th July	3	11	24	General paresis
29	E. B.....	F.....	66	12th July	10	7	19	Cancer of breast
30	H. D.....	M.....	33	20th July	1	1	21	Apoplexy
31	W. S.....	M.....	61	9th Aug..	0	2	0	Paralysis
32	H. R.....	M.....	62	18th Aug..	2	2	21	Marasmus
33	W. S.....	M.....	49	29th Aug..	10	9	6	Rupture of bowel
34	J. B. Mc.	F.....	38	2nd Sept.	0	9	1	Heart clot
35	M. M.....	F.....	70	4th Sept.	0	6	12	Old age
36	J. J.....	M.....	64	12th Sept.	0	1	21	Apoplexy
37	F. P.....	F.....	29	18th Sept.	0	1	5	Marasmus
38	W. P.....	M.....	66	19th Sept.	1	10	14	Marasmus

TABLE No. 7.

Showing trades or occupations of Patients admitted into the Asylum.

	During the Year.			During former Years			Total.
	Male.	Female.	Total.	Male.	Female.	Total.	
Agents	1	0	1	2	0	2	3
Bookbinders	0	0	0	0	2	2	2
Book-keepers	1	0	1	1	0	1	2
Bakers	1	0	1	2	0	2	3
Bricklayers	1	0	1	1	0	1	2
Butchers	2	0	2	4	0	4	6
Blacksmiths	1	0	1	9	0	9	10
Brass Finishers	0	0	0	1	0	1	1
Brewers	0	0	0	2	0	2	2
Barbers	0	0	0	2	0	2	2
Broom-makers	0	0	0	1	0	1	1
Cabinetmakers	0	0	0	5	0	5	5
Confectioners	0	0	0	2	0	2	2
Coopers	0	0	0	5	0	5	5
Carpenters	4	0	4	23	0	23	27
Clerks	1	0	1	17	0	17	18
Clergymen	0	0	0	1	0	1	1
Coppersmiths	0	0	0	1	0	1	1
Dyers	0	0	0	1	0	1	1
Domestic Duties	0	53	53	0	505	505	558
Dressmakers	0	0	0	0	4	4	4
Druggists	0	0	0	1	0	1	1
Engineers	1	0	1	3	0	3	4
Farmers	34	0	34	319	9	328	362
Fishermen	0	0	0	2	1	3	3
Founders	0	0	0	1	0	1	1
Ferry-men	0	0	0	2	0	2	2
Furriers	0	0	0	0	1	1	1
Gardeners	1	0	1	6	0	6	7
Hucksters	0	0	0	0	1	1	1
Hatters	0	0	0	1	0	1	1
Hostlers	0	0	0	1	0	1	1
Housekeepers	0	1	1	0	4	4	5
Jewellers	1	0	1	2	0	2	3
Labourers	30	0	30	240	0	240	270
Ladies	0	1	1	0	3	3	4
Laundresses	0	0	0	0	1	1	1
Lumbermen	0	0	0	1	0	1	1
Milliners	0	1	1	0	8	8	9
Masons	0	0	0	7	0	7	7
Machinists	0	0	0	4	0	4	4
Matchmakers	0	0	0	1	0	1	1
Millers	0	0	0	6	0	6	6
Moulders	0	0	0	3	0	3	3
Merchants	0	0	0	16	0	16	16
Music Teachers	1	0	1	0	1	1	2
Officers	0	0	0	1	0	1	1
Organ Builders	0	0	0	1	0	1	1

TABLE No. 7.—Continued.

	During the Year.			During former Years.			Total.
	Male.	Female.	Total.	Male.	Female.	Total.	
Pensioners	0	0	0	4	0	4	4
Plasterers	0	0	0	3	0	3	3
Prostitutes	0	1	1	0	4	4	5
Photographers	1	0	1	3	0	3	4
Painters	2	0	2	11	0	11	13
Printers	1	0	1	5	0	5	6
Pedlars	0	0	0	2	1	3	3
Physicians	0	0	0	3	0	3	3
Servants	0	11	11	2	117	119	130
Sailors	0	0	0	5	0	5	5
Students	2	0	2	9	0	9	11
Spinners	0	0	0	0	2	2	2
Sisters of Charity	0	0	0	0	1	1	1
Soda-water Manuf'rs.	0	0	0	1	0	1	1
Stonecutters	0	0	0	3	0	3	3
Showmen	0	0	0	2	0	2	2
Saddlers	1	0	1	3	0	3	4
Shoemakers	3	0	3	13	0	13	16
Seamstresses	0	1	1	0	6	6	7
Slaters	0	0	0	1	0	1	1
Ship-builders	1	0	1	1	0	1	2
School-teachers	0	1	1	12	9	21	22
Tinsmiths	0	0	0	4	0	4	4
Tavern-keepers	0	0	0	5	1	6	6
Tailors	2	2	4	15	1	16	20
Tanners	0	0	0	3	0	3	3
Toll-gate Keepers	0	0	0	1	0	1	1
Watchmakers	0	0	0	4	0	4	4
Wood Finishers	0	0	0	1	0	1	1
Weavers	0	0	0	0	2	2	2
Wheelwrights	0	0	0	1	0	1	1
Waggon-makers	2	0	2	2	0	2	4
No employment	4	9	13	39	80	119	132
Unknown	3	3	6	52	109	161	167
Total	102	84	186	908	873	1781	1967

TABLE No. 8.
Showing causes of Insanity.

Total
4
3
5
4
13
6
3
3
130
5
11
2
1
1
3
2
4
16
7
1
2
22
4
6
20
3
1
4
1
2
1
4
132
167
1967

CAUSES OF INSANITY. In respect of the admissions for the year ending 30th September, 1881.	Number of instances in which each cause was assigned.								
	As predisposing cause			As exciting cause.			As predisposing or exciting cause where these could not be distinguished.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
MORAL.									
Domestic troubles, including loss of relatives or friends				2	8	10			
Religious excitement				5	7	12			
Adverse circumstances, including business troubles				5	3	8			
Love affairs, including seduction					2	2			
Mental anxiety, "worry"	1	0	1	4	4	8			
Fright and nervous shocks		1	1	1	3	4			
PHYSICAL.									
Intemperance in drink				8	1	9			
Intemperance, sexual				1		1			
Veneral disease					1	1			
Self-abuse, sexual				5	1	6			
Over-work		1	1	1		1			
Sunstroke	1		1	3		3			
Accident or injury	2	1	3	1	1	2			
Pregnancy					2	2			
Puerperal					3	3			
Lactation		1	1		1	1			
Puberty and change of life					2	2			
Uterine disorders		1	1		6	6			
Brain disease, with general paralysis									
Brain disease, with epilepsy				1	3	4			
Other forms of brain disease	1		1	2	1	3			
Other bodily diseases or disorders, including old age	1	1	2	2	4	6			
Fevers				3	1	4			
HEREDITARY.									
With other ascertained cause in combination		1	3	4					
With other combined cause not ascertained		15	20	35					
CONGENITAL.									
With other ascertained cause in combination									
With other combined cause not ascertained									
Unknown	80	55	135	58	30	88			
Total	102	84	186	102	84	186			

1881

TABLE No. 9.

History of Probational Discharges during the official year ending September 30th, 1881.

	M	F	T	M	F	T
Total number allowed out on probation ..	..	..	..	27	47	74
Number of these discharged recovered ..	8	18	26			
“ “ “ improved ..	..	10	10			
“ “ “ unimproved ..	2	2	4			
“ “ returned to Asylum ..	10	9	19			
“ “ still out on probation ..	7	8	15			
	—	—	—	27	47	74

TABLE No. 10.

Showing the nature of Employment and the number of days' work performed by Patients during the year.

NATURE OF EMPLOYMENT.	Number of Patients who Worked.	Days Worked.		
		Male.	Female.	Total.
Carpenter's shop	7	1,921	.....	1,921
Tailor's shop	4	525	.....	525
Engineer's shop	5	1,451	.....	1,451
Blacksmith's shop .....	.....	.....	.....	.....
Mason work	5	902	.....	902
Roads .....	.....	.....	.....	.....
Wood yard and coal-shed	4	969	.....	969
Bakery	1	334	.....	334
Laundry	15	898	2,837	3,735
Dairy	3	362	338	700
Painting	5	1,009	.....	1,009
Farm	27	4,878	.....	4,878
Garden	20	5,001	.....	5,001
Grounds .....	.....	.....	.....	.....
Stable	5	1,590	.....	1,590
Kitchen	23	1,812	4,957	6,769
Dining rooms	22	2,446	4,949	7,395
Officers' quarters .....	.....	.....	.....	.....
Sewing rooms	32	.....	8,204	8,204
Knitting	15	.....	4,876	4,876
Spinning	1	.....	101	101
Mending	9	.....	2,631	2,631
Wards .....	.....	.....	.....	.....
Halls	190	22,356	21,680	44,036
Store room	2	549	.....	549
General	61	7,378	2,372	9,950
Total	456	54,581	52,945	107,526

TABLE No. 11.

Number of Articles passing through the Laundry during the year ending 30th September, 1881.

Articles.	Number.
Dresses	10,586
Dresses, Canvas	3,666
Night Dresses	4,829
Aprons	16,177
Skirts	5,506
Drawers	11,146
Chemises	26,156
Waists	1,956
Caps and Hoods	730
Shawls	49
Jackets	78
Handkerchiefs	6,924
Collars	6,005
Neckties	2,146
Cuffs (pairs)	1,476
Stockings (pairs)	12,470
Socks (pairs)	18,689
Shirts	25,830
Guernseys	2,077
Pants	3,295
Coats	1,739
Vests	1,049
Canvas Suits	847
Blankets	5,775
Sheets	60,828
Pillow-slips	48,821
Bolster-slips	323
Quilts	7,522
Quilts, Canvas	628
Bed-ticks	8,529
Pillow-ticks	139
Towels	26,686
Table-cloths	910
Table-napkins	1,993
Toilet covers	845
Crumb cloths	12
Pudding cloths	2,756
Carriage covers	23
Blinds and Curtains	207
Carpets	2
Bibs, etc., etc.	512
Total	329,937

1 year

F T
7 74

7 74

days

Total.

1,921

525

1,451

902

969

334

3,735

700

1,009

4,878

5,001

1,590

6,769

7,395

8,204

4,876

101

2,631

44,036

549

9,950

107,526

TABLE No. 12.

Number of Articles made and repaired in the Sewing Room
during the year ending September 30th, 1881.

Articles.	Made.	Repaired.
Dresses	962	0
Dresses, Canvas	77	0
Shirts	11	0
Chemises	556	0
Chemises, Flannel	16	0
Drawers	175	144
Aprons	569	0
Night Dresses	88	0
Caps	79	0
Collars	18	0
Cape	1	0
Neckties	143	0
Shoulder Shawls	24	0
Waists	25	0
Cloth slippers (pairs)	31	0
Shirts	809	2,158
Guernseys	0	12
Pants	601	1,148
Coats	298	538
Vests	260	305
Canvas suits	40	139
Blouses	37	0
Hats trimmed	12	10
Bags	16	0
Carriage covers	6	0
Socks (pairs)	0	3,202
Matrasses	81	0
Palliasses	0	10
Pillows, Feather	53	0
Pillows, Hair	311	0
Pillow ticks	52	0
Pillow slips	1,197	5
Bolsters, Feather	3	0
Bolster-slips	4	0
Sheets	964	64
Quilts Hemmed	106	30
Quilts, Canvas	23	3
Blankets overcast	319	23
Ticets	463	186
Ticets, Canvas	6	44
Curtains and Blinds	104	0
Towels	663	36
Table-cloths	19	0
Table-napkins	11	0
Flag	1	1
Canvas covers	4	0
Table cover, Bagatelle	1	0
Carpets	9	2
Crumb cloths	3	0
Padding cloths	92	0

TABLE No. 12.—Continued.

	Made.	Repaired.
Cushion.....	1	0
Books covered.....	300	0
Hans covered.....	22	0
Total.....	9,726	8,060

TABLE No. 13.

Number of Articles made and repaired in the Wards during the year ending September 30th, 1881.

Articles.	Made.	Repaired.
Dresses.....	46	2,745
Dresses, Canvas.....	0	891
Skirts.....	63	1,849
Chemises.....	103	1,959
Chemises, Flannel.....	6	30
Aprons.....	92	422
Shirts, Cotton.....	0	520
Shirts, Flannel.....	0	100
Socks (pairs).....	0	1,040
Stockings (pairs).....	0	2,555
Drawers.....	31	788
Night Dresses.....	9	373
Blankets overcast.....	200	436
Ticks.....	0	1,417
Towels.....	254	12
Pillow-slips.....	33	233
Quilts, Hemmed.....	132	521
Sheets.....	0	572
Waists.....	2	20
Total.....	931	16,483

Amount of Knitting done during the year ending September 30th, 1881:—

Stockings (pairs).....	531
Socks.....	185
Stockings re-footed (pairs).....	158
Socks " ".....	110
Total.....	984
Cotton wound and twisted.....	20 lbs.

TABLE No. 1.
SUPPLEMENTARY RETURN.

PERIODS.	Duration of insanity prior to admission.	Length of residence of those remaining in Asylum on 30th Sept.	Periods of treatment of those charged cured during the year.	Periods of treatment of those who were discharged improved during the year.	Periods of treatment of those who were discharged unimproved during the year.
Unknown	21				
Under 1 month	70	16	3		2
From 1 to 2 months	28	9	3		1
“ 2 “ 3 “	7	27	4	1	
“ 3 “ 4 “	2	18	2		1
“ 4 “ 5 “	5	13	6	2	1
“ 5 “ 6 “	3	11	5	1	1
“ 6 “ 7 “	3	8	5		
“ 7 “ 8 “	2	9	3		
“ 8 “ 9 “	1	9		2	
“ 9 “ 10 “	3	9	1		
“ 10 “ 11 “	6	10		1	
“ 11 “ 12 “	5	4	1		1
“ 12 “ 18 “	11	42	5	3	4
“ 18 months to 2 years	5	37	3	1	1
“ 2 to 3 years	3	72	1	2	
“ 3 “ 4 “	5	94	3		
“ 4 “ 5 “	3	40			
“ 5 “ 6 “		38			
“ 6 “ 7 “		40	1		
“ 7 “ 8 “		38			
“ 8 “ 9 “		24			
“ 9 “ 10 “		33	1		
“ 10 “ 15 “	1	65			
“ 15 “ 20 “		52			
“ 20 years upwards	2	134			
Totals	186	852	47	13	12

One patient discharged not insane after a residence of two months and seventeen days.

TABLE No. 2.
SUPPLEMENTARY RETURN.

	M.	F.	T.
Total admissions during the year	102	84	186
Number of such admitted for first time to Asylum	84	71	155
Number of re-admissions during the year	18	13	31
	102	84	186
No. 3.			
Total Admissions during past five years, viz., from 1st October, 1876, to 30th September, 1881	448	409	857
Number of such patients admitted once to Asylum	374	350	724
“ “ twice “	58	43	101
“ “ three times to Asylum	7	8	15
“ “ four “	5	3	8
“ “ five “	2	4	6
“ “ six times and over to Asylum	2	1	3
	448	409	857
No. 4.			
Total number of patients discharged recovered during year ..	24	23	47
Number of such discharged recovered for first time	18	20	38
“ “ second time	3	1	4
“ “ third “	3	2	5
	24	23	47
No. 5.			
Total number of patients discharged recovered during past five years, viz., from 1st October, 1876, to 30th September, 1881	184	188	372
Number of such subsequently re-admitted to Asylum once ..	22	19	41
“ “ “ twice ..	5	5	10
“ “ “ three times ..	3	2	5
“ “ “ four “ ..			
“ “ “ five “ ..			
“ “ “ six “ ..			
and over			

Periods of treatment of those who were discharged unimproved during the year.
 2
 1
 1
 1
 1
 4
 1
 12
 months and